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A method for collecting and disseminating information on hearing handicapped children was developed, and the availability of recorded information on both the incidence and development of hearing impaired children was determined. Detailed information was collected on 4,300 of the estimated 6,755 hearing impaired students enrolled in schools, classes, and other special education programs in the states of Maryland, Pennsylvania, Virginia, West Virginia, and the District of Columbia. The information concerned hearing threshold levels, ability to communicate, intelligence levels, achievement levels, methods used to communicate, and selected demographic characteristics. Every state in the country was also surveyed to obtain descriptive information about hearing screening programs and educational services for the hearing impaired. The conclusion was that a nationwide system for collecting data on hearing impaired students is feasible. Recommendations were made that a permanent program for collection of data and procedures for a sequential and segmented approach to the major operational and coverage problems be established; that major policies be determined by representatives of the sources and users of the data; and that the program include resources for improving methodology and evaluating data. Twenty-one tables are given. (Author/SN)

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FINAL REPORT

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UNITED STATES DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
OFFICE OF EDUCATION
BUREAU OF EDUCATION FOR THE HANDICAPPED
DIVISION OF RESEARCH

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U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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APRIL 1968

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UNITED STATES DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
OFFICE OF EDUCATION
BUREAU OF EDUCATION FOR THE HANDICAPPED
DIVISION OF RESEARCH

PREFACE

This document has been prepared to mark the completion of two years of activity directed toward developing procedures for collecting factual data on the characteristics of hearing impaired children. In the jargon of Federal grant procedures it is referred to as the "final report." Despite the jargon, it is not the intent here to write about the end of a program. The purpose here is to inspire a new program. A program that will provide a better means of meeting the needs of hearing handicapped children. For, despite the large growth in recent years of resources, human and financial, available for identifying and assisting the handicapped, the need is far greater than the supply. To make the most efficient use of these limited resources, we must have more knowledge about the population we are trying to help, and we must have the means of measuring the effectiveness of these efforts.

It is the intent of this document to show that factual information can be obtained on a systematic basis for a relatively small expenditure of resources.

The activities reported upon here have required the help and cooperation of many persons. To describe the contributions made by each would require an almost infinite amount of space. To single out some individuals is not just, for each has made an essential contribution. Therefore, to all the otganizations and persons listed below, I extend my sincere and grateful thanks for the assistance they have given.

Augustine Gentile
Washington, D.C.

ORGANIZATIONS

The Conference of Executives of American Schools for the Deaf
Gallaudet College
National Technical Institute for the Deaf
Kendall School for the Deaf
Maryland School for the Deaf
Pennsylvania School for the Deaf
Western Pennsylvania School for the Deaf
Pennsylvania State Oral School for the Deaf
Willis and Elizabeth Martin School
Virginia School for the Deaf and Blind
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* * *

SUMMARY

Presented here is a description of activities pursued over a period of two years directed toward the development of a method of collecting and disseminating comprehensive national statistics on the characteristics of hearing impaired children.

The knowledge gained during the study leads to a recommendation for the establishment of an office to conduct a permanent program of data collection.[1] Initially this office would collect data on students enrolled in schools and classes for the hearing impaired and eventually would collect information on children of all ages who have been identified as having a significant loss of hearing, whether or not they are in special education programs for the hearing impaired.

The report also contains detailed statistical information about 4,300 students enrolled in schools and classes for the hearing impaired in the states of Maryland, Pennsylvania, Virginia, West Virginia and the District of Columbia. The data were collected for the purposes of detecting problems of definition, terminology, availability of data and of developing solutions to these problems. Use of these data should be subject to the limitations and explanatory remarks presented in the text.

In order to determine the feasibility of collecting information about hearing impaired children on a national basis, it was necessary to conduct a survey of all the states in the country. The results of the survey are presented in tabular form in Appendix II of this report. These tables contain information on hearing screening programs, standards used, legal authorization for and administrative control of the programs. In addition, the tables show the number and type of educational programs provided, the number of students enrolled in each program and the type of administrative control for these programs.

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[1] The Office of The Annual Census of Hearing Impaired Children was formally established as of May 1, 1968.

INTRODUCTION

General

In February 1966, the Division of Research, Bureau of Education for the Handicapped, Office of Education, in recognition of the need for factual information about handicapped children, awarded a grant to Gallaudet College to develop a method for collecting information on hearing handicapped children. This report describes activities related to the project, presents the results of these activities, and suggests procedures for the establishment of an annual nationwide census of hearing impaired children.

Background Information

To date, the statistics available on the volume and characteristics of hearing impaired children have been derived from *ad hoc* studies usually covering small geographical areas. Attempts have been made to pool and project data from such studies to arrive at national estimates. However, in recent years, because of the expansion of programs for identifying and providing educational and health services for the hearing impaired, the need for reliable, current and useful national data has become increasingly important. Not only are data needed for better program planning and allocation of resources, but there is also a need to measure the efficacy of existing programs. It has been suggested that these needs can only be met by the establishment of an organization that will develop and operate a continuing program of data collection and dissemination.

The need for such an organization was recognized at a meeting sponsored by the National Institute of Neurological Diseases and Blindness, U.S. Public Health Service, held in March 1964. Leaders of various disciplines involved with the problems of the hearing impaired participated in the meeting. It was the unanimous conclusion of the participants that the National Institute of Neurological Diseases and Blindness should institute a program designed to provide the statistical information needed by all organizations in the field./1 In April 1964, the Conference of Executives of American Schools for the Deaf passed a resolution expressing its interest and support for the establishment of a program to collect uniform statistics about students in the schools for the deaf and other hearing impaired children.

/1 *Proceedings, Conference on the Collection of Statistics of Severe Hearing Impairments and Deafness in the United States, 1964*, Public Health Service Publication No. 1227, Washington, D.C.

The National Institute of Neurological Diseases and Blindness was unable to proceed with its plans because of administrative problems. Therefore, in 1965, the office which is now the Division of Research, Bureau of Education for the Handicapped, Office of Education, in recognition of the views expressed at the Conference and because of the need for data to better plan its own activities, took the initiative in seeking ways to solve the problem. This action, in part, took the form of a two-year grant to study the feasibility of and to develop methods and procedures for collecting nationwide information on hearing impaired children. This report is the result of the two-year grant.

OBJECTIVES

As indicated above, the primary objectives of this study were to ascertain the problems, develop procedures and make recommendations for an optimum method of collecting useful and reliable nationwide data on the number and characteristics of hearing impaired school-age children. The word "useful" in the previous sentence must be emphasized and explained here. The success of any data collection system that may follow from this developmental project can neither be measured in terms of the volume of computer tabulations that may result, nor in terms of the number of times that statistics derived from the system are quoted in speeches or professional journals. The success of this project and the success of any ensuing data collecting activities can only be measured in terms of the utility of the data in improving the educational status and general welfare of hearing impaired children. To achieve this goal, it is essential that general policy for the conduct of the program be made by a group representative of all the data sources and data users. The importance of the foregoing is taken into consideration in the final recommendations in this report.

In this section we have stated the general and long-range objectives of the study. The detailed and immediate objectives of the study are reflected in the section that follows.

The Problems

In order to achieve the general objectives stated above, it was determined, *a priori*, that answers to the following questions must be obtained.

1. What is the status of identification audiometry programs throughout the country?
    - (a) Who administers the program?
    - (b) To what extent do children with hearing losses have a chance of being identified?
    - (c) What kind of records are available on children who have been identified as having an impairment of hearing?
    - (d) Where are the records kept?
    - (e) Is there some efficient way of obtaining data from these records?

2. What kind of special educational services are available to hearing impaired children?
    (a) What are the criteria for obtaining these services?
    (b) Who administers the programs?
    (c) What kind of summary and individual records are kept?
    (d) Who keeps these records?
    (e) Is there some efficient way of obtaining data from these records?
3. Do officials at the state and local level need national data on the hearing impaired?
    (a) What kind of data do they need?
    (b) What kind of data are they collecting at the state or local level?
4. Is the need and interest of state and local officials for data sufficiently great for them to be willing to participate in a data collection system?
    (a) What are the practical barriers to participation?
    (b) What are the legal and administrative barriers to participation?
5. What would be the best way to collect data on the large number of the more severely hearing impaired children enrolled in full-time schools for the deaf?
    (a) What kind of records are kept?
    (b) Can information on students in schools for the deaf be pooled with information on hearing impaired students receiving other types of special education?
    (c) Would these schools be willing to participate in a data collection system?

METHODS

General

Prior to the time that this study began, it was decided to confine our activities to the states of Maryland, Pennsylvania, Virginia, West Virginia and the District of Columbia. These states were selected because they were close to the headquarters for the project, Gallaudet College, Washington, D.C. It was also believed that because of the difference among these states, in economic status, educational systems, population size and other characteristics, they might be generally representative of all the states in the country. Subsequent events proved this assumption was not correct and it became necessary to gather a substantial part of the desired information from all parts of the country.

At the outset of this project, the only preconceived notion the author had was that final recommendations concerning methods and procedures for collecting data on hearing impaired children would be based on the knowledge and advice of persons directly involved in identifying and providing services for these children. This philosophy was adhered to throughout the course of the study.

The sections that follow describe categorically the major activities pursued in carrying out the project.

1. Informational Contacts.

   By means of letters, phone calls and, subsequently, personal visits, superintendents of schools for the deaf and officials of the departments of education and health in the five-state area were informed about the purposes of the project. News about the project was received with a great deal of enthusiasm by all persons contacted and many made unsolicited promises to cooperate with the project in all ways possible. These visits also served to establish lines of communication for further contact and exchanges of information.

2. Collecting Information.

   During the initial visits with state and school officials, arrangements were made to obtain information about:

   a. The status of identification audiometry programs and the availability of educational and health services in each state.

   b. The kinds of individual records kept on students receiving special educational training.

These efforts produced extensive information about the operational details of programs for hearing impaired children. It was also learned that some states did not have any organized programs for these children.

Samples of records kept on individual children revealed the types of information that were on file. As might be expected, there was a wide variety in the kinds of information available for individual children but more important were the similarities in the kinds of data that were available. On the basis of the information obtained in conversations, written descriptive material and samples of the records kept on the children enrolled in special education programs for the hearing impaired, it was possible to formulate and carry out the next steps of the program.

3. Development of a Reporting Form.

One of the planned steps in the project design was to collect information on hearing impaired students in the five-state area. The procedures followed in the development of a form for this purpose are described in this section.

In the development of the form prime consideration was given to the following factors:

a. The content should be limited to only a few basic topics, in order to reduce the burden of preparing the forms.

b. The requested information should be available from most of the potential reporting sources.

A draft of the form was prepared and distributed, for comments, to persons in the five-state area. In addition, the forms were completed for a portion of the students enrolled at one of the schools for the deaf in the area.

On the basis of the comments received and the experience gained in completing the forms at the schools for the deaf, a revised version was prepared.

In January 1967, representatives of the department of education and health of the five-state area and the superintendents of five schools for the deaf in the area participated in a meeting to discuss the status of the project, the revised reporting form and further participation in the project. A final version of the reporting form (see Appendix III) was adopted and all the participants agreed to make arrangements for completing the individual form on students enrolled in their jurisdictions.

Three of the states represented could only provide information on students enrolled in the four schools for the deaf in their areas. Two of the states agreed to complete the forms for all hearing impaired students in schools for the deaf as well as those in classes or itinerant programs.[1] The forms were completed for students enrolled during the 1966-67 school year.

4. Collecting Data on the Characteristics of Students in the Five-State Area.

As noted previously, the primary purpose for collecting data on the individual students was for methodological analyses. The objectives were to determine the availability of information for selected topics and to evaluate the quality of the reported information. In addition, there was interest in developing standard terminology, definitions and instructional materials. Respondents were given only a few instructions for completing the forms and they were asked to report any difficulty they had in understanding the form or getting the required information.

---

[1] For the purpose of this report the following terms are defined as indicated:

Schools for the deaf - These consist of a building or a group of buildings used exclusively for the instruction of hearing handicapped children. In residential schools for the deaf a majority of the students remain overnight on weeknights during the school year. In day schools for the deaf a majority of the students go home at the end of the school day.

Classes for the deaf - These are special classrooms set aside for the instruction of hearing handicapped children. These special classes are usually held in a school for students with normal hearing. Hearing impaired students attend the special classes on either a full-time or part-time basis.

Itinerant programs - These are generally programs in which a teacher travels to two or more schools to provide special instruction to hearing handicapped children. Except for these periods of special instruction, the children attend regular classes.

Before the end of 1966-67 school year, records were received for 2,074 students enrolled in seven residential schools for the deaf,/1 371 students in the two day schools for the deaf in the five-state area, and 1,856 students in classes and itinerant programs in two of the areas (Pennsylvania and the District of Columbia).

In all, 4,301 records were received. All of the information on the records was classified, coded and prepared for computer input. The qualitative and quantitative results of this phase of the project are discussed in a later section.

5. Nationwide Survey of Identification Audiometry and Educational Services for the Hearing Impaired.

From the initial information obtained from the five-state area, it was learned that only two of the five states had statewide identification audiometry programs and educational programs coordinated at the state level. Many areas in a third state had identification programs and provided educational services, but these were controlled at the local level. In the other two states there was very little activity related to these programs. Because of the wide differences found within the five-state area, both as to the scope of services provided and the methods and procedures used in hearing screening programs and educational programs for the hearing impaired, it became obvious that information from additional states would be necessary before recommendations could be made about the feasibility of a nationwide data collection program. Accordingly, the scope of the project was expanded and letters and questionnaires were sent to all of the states in April of 1967. The questionnaires requested descriptive information about the availability of services for hearing impaired children. Copies of the covering letter, questionnaires and related materials are shown in Appendix IV. Eventually replies were received from 47 states and the District of Columbia. The substantive results of the survey are presented later in the report.

/1 Records were not requested from two residential schools in the five-state area. These two schools have a total enrollment of 204 students.

RESULTS OF THE STUDY

This section is divided into three parts. The first part deals with the general objectives of the study. That is, what was learned about the availability of information and the problems and feasibility of collecting information on hearing impaired children. The second part discusses the data collected on students from the five-state area, and the third part reviews the results of the nationwide survey of identification audiometry programs and educational and health services for the hearing impaired.

Findings Related to the General Objectives of the Project.

1. Types of Data Available.

   As stated before, one of the general objectives of the study was to determine the type of information that is recorded for hearing impaired children and the quality and homogeneity of the data. Based on an examination of files, copies of forms and actual records received from the five-state area, it may be said that extensive information is kept on all children who are receiving special educational training because of an impairment of hearing. While there is a great deal of variation in format, terminology and definitions, almost always the following types of information are kept:

   Name
   Residence
   Date of Birth
   Sex
   Expressive and Receptive Communication Skills
   Results of Audiological Tests
   Years of School Attendance
   Achievement Levels
   Intelligence Levels
   Age at Onset of Loss
   Existence of Other Handicapping Conditions.

2. Means of Collecting Data.

In order to determine more specifically the best methods or channels for collecting data on hearing impaired students enrolled in special education programs, data was sought for students enrolled in these programs in the five-state area.

In one state, Pennsylvania, all the records were obtained through the Supervisor of Speech and Hearing Programs of the Department of Public Instruction. Records were obtained for all students in public schools and classes and for fifty percent (50%) of the students in itinerant programs. It was determined that records from the two private schools for the deaf in the state would have to be collected directly from the schools but because of time limitations, no effort was made to collect these records.

In three states, Maryland, Virginia and West Virginia, records were collected only from the schools for the deaf. Contact and communications were made directly with each school. It was found in these states that records on students in classes or in other programs were kept at the local level and that in order to collect these records officials at the local level would have to be contacted.

For the District of Columbia records were obtained directly from the school for the deaf which provides services for hearing impaired children who live in the District of Columbia and other nearby areas. In the District, children enrolled in special classes and children enrolled in itinerant programs come under the jurisdiction of separate program supervisors. Records for these children were provided by the supervisor of each program.

As indicated by the foregoing, the channels of communication and sources through which data might be collected varied a great deal in the five-state area. Therefore, it became necessary to obtain data on potential information sources from all the states, in order to determine the best methods of collecting data nationally on hearing impaired children.

3. Quality of the Data.

In order to obtain the best picture possible of the availability and quality of existing information, respondents were given very little instructional and definitional information. Further, they were asked to complete the forms on the basis of existing information without making any extraordinary efforts to fill in items on the form by conducting new tests or audiological examinations. Thus, we were able to obtain some measure of the proportion of times that usable data for important variables were available.

In all, records were obtained on 4,301 hearing impaired students in the five-state area. Table A shows the percentage of records for which data for the listed items were not reported or were not usable.

These percentages clearly indicate that the greatest problem areas in terms of non-reporting were the items on achievement testing and intelligence levels. It should be noted that in many cases information was given for these items, but because of lack of instructions it was not in usable form. Other items for which there was a high proportion of unusable responses or non-responses were:

Years of School Attendance
Age at Onset of Loss.

It is believed that procedures can be developed to reduce the non-reporting for all items below the ten-percent level.

As indicated, achievement test scores and intelligence scores were frequently not reported or when reported lacked enough information to make them usable. In addition, a great variety of tests were administered to persons within the same age groups. While the scores for different achievement and intelligence tests had the same distribution patterns for a given age group, the frequencies were not large enough to determine if the same results would be obtained in a large sample. In an ongoing survey this problem could be largely resolved by having all respondents use a standard test and standard procedures for administering the tests.

TABLE A: PERCENTAGE OF RECORDS FOR WHICH DATA FOR SELECTED ITEMS WERE NOT REPORTED OR WERE NOT USABLE.

ITEM	All Students N = 4301	Students in Residential Schools N = 2074
	Percent	Percent
Age	0.0	0.0
Sex	0.0	0.0
Achievement Tests[/1]		
Battery Medians	30.6	17.4
Reading Levels	54.6	42.6
Hearing Threshold Levels	12.6	11.3
Intelligence Quotients[/1]	47.0	67.0
Age at Onset of Loss	34.7	25.0
Total Years Attended School	15.8	24.2
Lipreading Ability	6.3	2.4
Methods Used to Communicate to Others	4.5	2.1

[/1] Reporting for these items was only required for students eleven years of age and older.

4. Summary.

In summary the records collected from the five-state area show that useful data is recorded for hearing impaired students enrolled in special education programs. It also has been demonstrated that the information is available for a data collection system. Finally, it is believed that the problems of underreporting and standardization can be readily resolved in an ongoing regular data collection system.

Findings From Records of Students in the Five-State Area.

1. Sources and Limitations of the Data.

For methodological purposes, data were collected on 4,301 hearing impaired students receiving special educational training in a five-state area. Table B shows the proportion of the estimated total of hearing impaired students in the five-state area, for whom records were obtained, by type of educational program.

All of the records collected on students enrolled in classes and itinerant programs came from two areas, Pennsylvania and the District of Columbia. These records were collected through the efforts of personnel in the state department of education. At the time the data were collected it was not feasible for personnel at the state level in the other three states to attempt to collect the information from programs in their states. Therefore, no effort was made to collect data on students enrolled in classes and itinerant programs in these areas. However, records on the students in schools for the deaf in these three states were collected. On the basis of the foregoing, therefore, statistics cited here and in the detailed tables in Appendix I should be considered as highly representative of the schools in the entire five-state area, but only representative of classes and itinerant programs for Pennsylvania and the District of Columbia. The reader is further cautioned that because little is known about the distribution and characteristics of the hearing impaired school population in the United States, there is no way of determining how representative of the total universe the data from the five-state area might be.

TABLE B: ESTIMATED NUMBER OF HEARING IMPAIRED STUDENTS IN THE FIVE-STATE AREA AND THE NUMBER AND PERCENT OF STUDENTS FOR WHOM RECORDS WERE OBTAINED, BY TYPE OF EDUCATIONAL PROGRAM.

Type of Program	Estimated Total Number of Students in the Five-State Area	Records Received	
		Number	Percent of Estimated Total
Residential Schools	2,278	2,074	91.0
Day Schools	386	371	96.1
Classes	1,271	751	59.1
Itinerant Programs	2,800	1,105	39.5
All Programs	6,735	4,301	63.9

Therefore, projections of these data to prepare estimates for students in other states are not warranted. Other factors that limit the validity of these data are the high proportion of "unknowns" for some of the items and the pooling together of scores from a great variety of tests to produce the data on achievement and intelligence levels. In view of these limitations the validity of the statistics presented here are open to question. It is not possible to defend or describe the validity of the data. However, presentation of the data is justified in terms of the objectives of the study, i.e., to demonstrate the general availability of information and to determine the problems and develop the procedures necessary to collect useful data for presentation in a meaningful form. These data, then, are presented to show what is available and how they might be presented in analytical statistical tables. In an ongoing operational program of data collection the validity of the data can be improved by use of standard measures, terms and procedures. Further, the program would be expected to devote a substantial portion of its resources to evaluation studies. Thus, the reliability of any published statistics could be described in the usual statistical terms.

2. Some Highlights of the Data.

In the five-state area about forty percent (40%) of the estimated 6,735 hearing impaired students enrolled in special education programs are attending schools for the deaf. The others are enrolled in classes and itinerant programs. Slightly more than half (56%) of the students for whom records were obtained were males. Audiometrically, for those for whom information was received, eighty-nine percent (89%) of the students in schools for the deaf had hearing threshold levels of 60 dB(ASA) or higher, compared to eleven percent (11%) for students enrolled in other programs. At the other end of the audiometric scale, only one percent(1%) of the students in schools, compared to sixty-eight percent (68%) of the students in other programs has threshold levels below 40 dB(ASA).

Age at onset of hearing loss was reported for about seventy-five percent (75%) of the students from residential schools; hearing loss was reported as occurring at birth for seventy-six percent (76%) of these students and under three years of age for ninety-six percent (96%) of the students. Age at onset was reported for fifty-six percent (56%) of the students enrolled in other than residential schools; hearing loss was reported as occurring at birth for seventy-three percent (73%) of these students and as under three years of age for eighty-two percent (82%) of the group.

About thirty percent (30%) of the students in residential schools were described as having enough ability to express themselves orally so that most of their speech could be understood by others. Among the other students about seventy-seven percent (77%) were so described.

The distribution of reading levels, as determined by scores from a variety of tests, were computed for students 14-17 years of age with hearing thresholds at 50 dB(ASA) or higher. It was found that twenty-six percent (26%) had below third-grade reading levels, thirty-two percent (32%) had between third-and fourth-grade levels; twenty percent (20%) had between fourth-and fifth-grade levels and twenty-two percent (22%) read at the fifth-grade or higher level.

The tables in Appendix I contain additional details on these and other variables.

Findings From the National Survey of Identification Audiometry Programs and Educational Services For the Hearing Impaired

In order to begin collecting useful data on hearing impaired children on a national basis, two basic factors are required. One is that the hearing impaired child has a chance of being identified and secondly, that a record containing descriptive information about his hearing loss and other pertinent characteristics must be available. To determine to what extent these factors were present, a survey of the fifty states and the District of Columbia was conducted. Replies were received from all but three states. Descriptive summaries of the data are presented in Tables 15 and 16 in Appendix II. Presented below are some highlights that were extracted from these tables.

1. Identification Audiometry Programs.

   The extent to which hearing screening programs are conducted in the country is reflected in Table C. It may be inferred from the data in this table that, proportionately, a larger number of children are covered by hearing screening programs in state that have programs coordinated at the state level than in the other states. It should be noted that several additional states reported they are in the process of developing state coordinated programs.

   For those states that reported this information, the number of children screened in a recent year is shown in Table D. Many states reported difficulty in obtaining this information. Since it was not a major purpose of the survey to collect numerical data on this item, no effort was made to obtain better reporting on the number of children screened. Therefore, the total number of children screened shown in the table is a minimum number and we have no information available from the study to indicate what proportion of the actual total number of children screened this represents.

   Additional information regarding testing procedures, follow-up procedures, legislative authority and other program information is given in the tables in Appendix II.

TABLE C: NUMBER OF STATES WITH HEARING SCREENING PROGRAMS, BY EXTENT OF COVERAGE AND EXTENT OF STATE LEVEL OF INVOLVEMENT IN THE SCREENING PROGRAMS.

Extent of Coverage of Screening Programs /1	Total States With Specified Coverage	EXTENT OF STATE LEVEL INVOLVEMENT		
		Coordinated at the State Level	Little or No Involvement at the State Level	Extent of Involvement at the State Level Not reported
		Number of States		
U.S. TOTAL	51	25	22	4
Substantial	27	21	6	0
Moderate	7	2	5	0
Very Little	6	0	6	0
Not Reported	11	2	5	4

/1 The categories shown in this table are for many states based on a highly subjective interpretation of the information received. The terms may be very roughly considered to mean: "substantial" - 60% or more of the school-age population covered; "moderate" - 30%-59% covered; "very little" - less than 30% covered. It is believed that a majority of the states in the "not reported" category have "very little" coverage.

TABLE D: NUMBER OF STATES WITH HEARING SCREENING PROGRAMS, BY EXTENT OF COVERAGE AND NUMBER OF CHILDREN SCREENED IN A RECENT YEAR /1 FOR REPORTING STATES.

Extent of Coverage /2	Number of States With Specified Coverage	NUMBER OF CHILDREN TESTED IN A RECENT YEAR				
		Entire State Reported		Only Part of State Reported		Number Screened Not Reported
		Number Screened	Number States	Number Screened	Number States	Number States
U.S. Totals	51	4,100,202	12	2,858,257	15	24
Substantial	27	4,029,909	10	2,701,771	9	8
Moderate	7	79,293	2	135,048	4	1
Very Little	6	--	--	21,438	2	4
Not Reported	11	--	--	--	--	11

/1 Year for which data was reported varies from state to state, but most reports were for the 1966-67 school year.

/2 See footnote to Table C.

2. Educational Services.

For the 1966-67 school year, estimates of the number of students enrolled in special education programs for the hearing impaired, by type of programs and the number of states offering these programs are given in Table E. Because we did not attempt to cover private institutions in our survey, data for private institutions were obtained from the May 1968, issue of the American Annals of the Deaf.

The table shows that 22,084 students are enrolled in public and private residential and day schools for the deaf. An additional 15,688 students are enrolled in special classes for the hearing impaired. However, six states that have classes did not report enrollment figures for students attending these classes. Only 18 of 39 states that reported having itinerant programs submitted enrollment figures. The total number of children enrolled in itinerant programs in these states amounted to 16,370. Thus, the total reported number of children enrolled in all programs amounted to 54,142.

Of importance, in terms of the survey objectives, was information obtained about the kinds of records kept on students enrolled in special education programs and the accessibility of these records. Only nine states reported that individual records on students enrolled in classes and itinerant programs were kept at state level. All other states reported that individual records were kept at the local level only. Records on individuals in schools for the deaf are kept at the schools only.

The detailed tables in Appendix II contain additional types of information on educational services that have not been summarized here.

TABLE E: NUMBER AND TYPE OF SPECIAL EDUCATION PROGRAMS FOR HEARING IMPAIRED CHILDREN AND NUMBER ENROLLED IN THESE PROGRAMS: UNITED STATES, 1966-67 SCHOOL YEAR.

Type of Program	Number	Number of States With Programs	Number of Students	Number of States Reporting Enrollment
Schools				
Public	85	48	20,352	48
Private[1]	26	17	1,732	17
Classes				
Public	470[2]	44	14,341	38
Private[1]	53	25	1,347	25
Itinerant Programs	--	39	16,370	18

[1] Data was obtained from the May 1967 issue of the American Annals of the Deaf.

[2] One state did not report the number of classes.

CONCLUSIONS

Evidence has been presented that much useful information is available on children enrolled in special education programs for the hearing impaired. It has also been demonstrated that this information can be collected and prepared to provide much needed statistical information. Further, the study has generated a great deal of interest among educators and other persons serving the hearing impaired. This interest has been expressed in the form of written offers to cooperate in a data collection program.

The problem areas that the study has uncovered may be classified into two groups, operational and coverage.

The major operational problems are the excessive number of sources from which data would have to be collected for a nationwide data gathering system and the lack of standard terminology and definitions to describe important characteristics of hearing impaired children. It is believed that these operational problems are amenable to solutions and suggested solutions are contained in the recommendations in a later section of this report.

The coverage problem is due to the fact that in some areas of the country hearing screening programs are non-existent. Thus, it may be presumed that some children with impaired hearing have not been identified. However, there is encouraging evidence that better identification programs are developing in these areas.

The study has developed some illustrative statistical information on 4,301 students enrolled in special education programs and has also produced a comprehensive description of the programs that are available in each state to identify and provide educational services for hearing impaired children.

RECOMMENDATIONS

Based on the evidence developed from this study, it is recommended that a permanent program be established to collect, analyze and disseminate comprehensive statistical information about the number and characteristics of hearing impaired children in the United States. The paragraphs that follow suggest the procedures to be followed in establishing such a program.

The need for national information on hearing impairments has been cited here and by most organizations and individuals concerned with these problems. During this study records were obtained on almost one-hundred percent (100%) of the students for whom records were sought. This is ample evidence that useful data are available and that the data can be collected. This recommendation suggests procedures for establishing a nationwide data gathering system and offers solutions to the major problems involved in establishing such a system. Furthermore, it is believed that the procedures outlined here can serve as a model for programs to collect data on children with other handicapping conditions.

The major problems involved in establishing such a system and the suggested solutions may be summarized as follows:

1. The lack of national data can be attributed largely to the fact that heretofore there has been no central organization with a continuing responsibility for collecting data on handicapped children.

   These recommendations propose the establishment of such an organization.

2. Records currently kept are not uniform in content or quality between and within states.

   The continuing program envisioned by this proposal would permit the development of standard reporting forms with uniform definitions and standard tests, e.g., standard achievement and intelligence tests.

3. Since in many states records on students attending special classes or involved in itinerant programs are kept at the local level only, it might be too much of a burden to collect records directly from each school.

Information collected from all fifty states during the developmental phase of the project has indicated which states have central record-keeping systems. It has also been found that many of the states are in the process of organizing programs that will lead to central record-keeping systems.

The establishment of a permanent data gathering organization would in many cases provide the motivation and impetus for establishing central record-keeping systems. The program would offer encouragement and assistance to state officials seeking to develop such systems.

4. The willingness of school officials to cooperate with such a venture is of major importance.

   In November 1967, the Executive Committee, Conference of Executives of American Schools for the Deaf reaffirmed a resolution passed by the membership in 1964 expressing its interest and support in the development of an annual census of the hearing impaired.

   Evidence of the interest of state officials and their willingness to cooperate is shown in Appendix V.

   In order to maintain their interest and cooperation, an advisory committee composed of representatives of the participating schools and school systems should be created. The advisory committee would provide the information and guidance necessary for the project staff to keep abreast of the current needs and problems of educators at the local level. With this guidance, the project staff would be able to collect and disseminate the kinds of information that are needed most by persons in the field. Thereby, interest in the project should be sustained at a high level.

The suggested procedures for the first year of such a program are as follows:

1. Schools for the Deaf.

   Information similar to that collected during the developmental phase of the project would be collected on every individual enrolled in a school for the deaf in the United States. After the first year, other kinds of information would be collected, some annually and some less frequently. A decision as to the final content of the form to be used each year would be made in consultation with the advisory committee.

Standard achievement and intelligence tests would be supplied by the central office and administered by the schools in accordance with uniform procedures.

A schedule for data collection would be established to permit the preparation of:

a. National summaries prior to the beginning of each school year.

b. Summaries for individual schools prior to the beginning of each school year.

c. Detailed analyses and detailed statistical tables within twelve months of the close-out date for returning the forms (probably in the Spring of each year).

2. Classes for the Deaf.

Efforts would be made to obtain and maintain a complete listing of schools with classes for the hearing impaired.

A national sample of not less than fifty schools with classes for the deaf would be asked to prepare a form similar to Appendix III, for all of their hearing impaired students.

Statistical summaries containing data comparable to the data from the schools for the deaf would be published.

Visits and meetings with representatives of state departments of education and schools with classes for the deaf would be held with a view toward expanding the system to include all of these schools.

3. Other Hearing Impaired.

Information developed to date indicates that there are many hearing impaired students enrolled in regular schools who are receiving special training or assistance on an itinerant basis. Knowledge about the extent of hearing loss and other characteristics of these students is required.

In states where records on these students are now available at a central point, data similar to that collected on students in schools and classes for the deaf would be collected on individual students.

In states where records are now kept at the local level only, summary statistics would be gathered. In addition, state officials would be encouraged to develop procedures for collecting individual records at the state level.

Procedures for subsequent years will evolve from the experience gained in the operation of the program. However, in subsequent years the program should provide resources for improving methodology and evaluating the data flowing into the system.

In summary these recommendations suggest:

1. The establishment of a permanent program for the collection of data on hearing impaired children and procedures for a sequential and segmented approach to the major operational and coverage problems.

2. Major policies for the program should be determined by representatives of the sources and users of the data.

3. The program include resources for improving methodology and evaluating data.

APPENDIX I

Detailed Tables, Showing Characteristics of Students in the Five-State Area.
Explanatory Notes and Definitions.

For a better understanding of the data in the tables that follow, explanatory notes and definitions for some of the terms used in the tables are given below.

NOTES AND DEFINITIONS

Five-State Area - The five-state area includes Maryland, Pennsylvania, Virginia, West Virginia and the District of Columbia.

Type of School

Schools for the Deaf - These consist of a building or group of buildings that are used exclusively for the instruction of hearing handicapped children. In residential schools for the deaf a majority of the students remain overnight on weeknights during the school year. In day schools for the deaf a majority of the students go home at the end of the school day. Data were obtained from seven residential schools and two day schools in the five-state area.

Classes for the Deaf - These are special classrooms set aside for the instruction of hearing handicapped children. These special classes are usually held in a school for students with normal hearing. Hearing impaired students attend the special classes on either a full-time or part-time basis. Only two of the five states provided information on classes for the deaf.

Itinerant Programs - These are generally programs in which a teacher travels to two or more schools to provide special instruction to hearing handicapped children. Except for these periods of special instruction, the children attend regular classes.

All Types of Schools - The tables showing data for "All Types of Schools" contain summations of the three programs cited above, students enrolled in schools, classes and itinerant programs for the hearing impaired.

Age - Age as defined here is as of December 31, 1966.

Hearing Threshold Levels - Approximately sixty-five percent (65%) of the records with audiometric information were reported in terms of ASA standards. Records for the remaining thirty-five percent (35%) were reported in terms of ISO standards. The data from these records were converted to the ASA standards by substracting ten decibels (10 dB) from the reported ISO values.

Adjusted Battery Medians - The reported battery medians were adjusted mathematically, so that all students in a given age level were assumed to have reached that age on December 31, 1966. The achievement tests were assumed to have been given on that same date. As noted previously, the reported scores came from a wide variety of tests given to the students.

Adjusted Reading Levels - The reported reading levels were adjusted mathematically, so that all students in a given age level were assumed to have reached that age on December 31, 1966. The tests for reading levels were assumed to have been given on that same date. Reported reading levels also came from a wide variety of tests.

Intelligence Quotients - Scores for non-verbal tests of intelligence were used. Scores that were more than two-years-old were not used. The scores came from a wide variety of tests.

Total Years Attended Schools - The total number of years the child was reported to have attended school prior to the 1966-67 school year was used.

Ability to Hear and Understand Speech Without Use of a Hearing Aid - Classification was based on a subjective judgment made by the student's teacher.

Ability to Hear and Understand Speech With Use of a Hearing Aid - Classification was based on a subjective judgment made by the student's teacher.

Lipreading Ability - Classification was based on a subjective judgment made by the student's teacher.

Methods Used to Communicate to Others - Manual includes both the manual alphabet and the language of signs. The use of gestures was reported mainly for children just starting school.

Reading Ability - Classification for this variable was based on a subjective judgment made by the student's teacher.

SPECIAL NOTE REGARDING THE FORMAT OF THE TABLES

Many of the tables that follow run several pages. The main table titles are repeated on each page, and the sections of the tables are identified by letters following the table numbers and by appropriate subheadings which appear above the numerical data.

TABLE 1. NUMBER OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, SEX & AGE: 1966-67 SCHOOL YEAR*

SEX & TYPE OF SCHOOL	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
Both Sexes											
All Schools	4301	1964	311	347	348	322	294	253	225	143	94
Residential	2074	854	130	159	170	157	148	140	127	109	80
Day	371	213	32	29	25	26	21	9	14	1	1
Classes	1856	897	149	159	153	139	125	104	84	33	13
Males											
All Schools	2395	1080	180	198	186	185	171	127	130	82	56
Residential	1160	467	78	94	95	90	86	68	74	60	48
Day	186	108	18	11	12	14	12	1	8	1	1
Classes	1049	505	84	93	79	81	73	58	48	21	7
Females											
All Schools	1906	884	131	149	162	137	123	126	95	61	38
Residential	914	387	52	65	75	67	62	72	53	49	32
Day	185	105	14	18	13	12	9	8	6	0	0
Classes	807	392	65	66	74	58	52	46	36	12	6

*See Notes and Definitions, Page 28.

TABLE 2A. NUMBER OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS, SEX AND AGE: 1966-67 SCHOOL YEAR. *

SEX & HEARING LEVELS IN dB (ASA)	ALL TYPES OF SCHOOLS										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
Both Sexes All dB Levels	4301	1964	311	347	348	322	294	253	225	143	94
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
40-49 dB	261	103	20	27	36	17	15	15	10	12	6
50-59 dB	284	129	17	15	19	28	18	13	28	12	5
60 dB & Over	2102	870	146	171	173	164	157	138	115	96	72
Unknown dB	544	326	37	33	32	26	31	26	18	11	4
Males All dB Levels	2395	1080	180	198	186	185	171	127	130	82	56
Under 40 dB	631	300	51	59	48	49	45	33	35	7	4
40-49 dB	162	68	13	15	18	12	9	10	5	8	4
50-59 dB	154	74	10	9	7	14	10	5	17	7	1
60 dB & Over	1158	462	85	97	93	96	92	71	62	54	46
Unknown dB	290	176	21	18	20	14	15	8	11	6	1
Females All dB Levels	1906	884	131	149	162	137	123	126	95	61	38
Under 40 dB	479	236	40	42	40	38	28	28	19	5	3
40-49 dB	99	35	7	12	18	5	6	5	5	4	2
50-59 dB	130	55	7	6	12	14	8	8	11	5	4
60 dB & Over	944	408	61	74	80	68	65	67	53	42	26
Unknown dB	254	150	16	15	12	12	16	18	7	5	3

*See Notes and Definitions, Page 28.

TABLE 2B. NUMBER OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS, SEX AND AGE: 1966-67 SCHOOL YEAR.*

SEX & HEARING LEVELS IN dB (ASA)	RESIDENTIAL SCHOOLS										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
Both Sexes All dB Levels	2074	854	130	159	170	157	148	140	127	109	80
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
40-49 dB	44	18	2	3	5	4	1	3	5	1	2
50-59 dB	109	39	5	5	8	11	7	4	19	8	3
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Unknown dB	235	163	8	10	11	7	8	11	4	10	3
Males All dB Levels	1160	467	78	94	95	90	86	68	74	60	48
Under 40 dB	12	6	0	0	0	2	1	1	1	0	1
40-49 dB	27	11	1	2	3	1	0	2	5	1	1
50-59 dB	56	21	2	3	4	4	5	1	11	5	0
60 dB & Over	938	338	72	82	81	79	76	63	53	49	45
Unknown dB	127	91	3	7	7	4	4	1	4	5	1
Females All dB Levels	914	387	52	65	75	67	62	72	53	49	32
Under 40 dB	8	3	0	1	1	1	0	1	1	0	0
40-49 dB	17	7	1	1	2	3	1	1	0	0	1
50-59 dB	53	18	3	2	4	7	2	3	8	3	3
60 dB & Over	728	287	43	58	64	53	55	57	44	41	26
Unknown dB	108	72	5	3	4	3	4	10	0	5	2

*See Notes and Definitions, Page 28.

TABLE 2C. NUMBER OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS, SEX AND AGE: 1966-67 SCHOOL YEAR.*

SEX & HEARING LEVELS IN dB (ASA)	DAY SCHOOLS										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
Both Sexes All dB Levels	371	213	32	29	25	26	21	9	14	1	1
Under 40 dB	6	3	0	1	1	0	1	0	0	0	0
40-49 dB	15	7	3	2	2	1	0	0	0	0	0
50-59 dB	36	19	3	2	2	5	2	1	2	0	0
60 dB & Over	259	148	23	21	16	17	13	8	11	1	1
Unknown dB	55	36	3	3	4	3	5	0	1	0	0
Males All dB Levels	186	108	18	11	12	14	12	1	8	1	1
Under 40 dB	3	0	0	1	1	0	1	0	0	0	0
40-49 dB	11	7	2	1	0	1	0	0	0	0	0
50-59 dB	22	10	3	1	0	4	2	0	2	0	0
60 dB & Over	119	70	11	7	8	8	6	1	6	1	1
Unknown dB	31	21	2	1	3	1	3	0	0	0	0
Females All dB Levels	185	105	14	18	13	12	9	8	6	0	0
Under 40 dB	3	3	0	0	0	0	0	0	0	0	0
40-49 dB	4	0	1	1	2	0	0	0	0	0	0
50-59 dB	14	9	0	1	2	1	0	1	0	0	0
60 dB & Over	140	78	12	14	8	9	7	7	5	0	0
Unknown dB	24	15	1	2	1	2	2	0	1	0	0

*See Notes and Definitions, Page 28.

TABLE 2D. NUMBER OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS, SEX AND AGE: 1966-67 SCHOOL YEAR.*

SEX & HEARING LEVELS IN dB (ASA)	CLASSES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
Both Sexes All dB Levels	1856	897	149	159	153	139	125	104	84	33	13
Under 40 dB	1084	524	91	99	86	84	71	59	52	12	6
40-49 dB	202	78	15	22	29	12	14	12	5	11	4
50-59 dB	139	71	9	8	9	12	9	8	7	4	2
60 dB & Over	177	97	8	10	12	15	13	10	7	5	0
Unknown dB	254	127	26	20	17	16	18	15	13	1	1
Males All dB Levels	1049	505	84	93	79	81	73	58	48	21	7
Under 40 dB	616	294	51	58	47	47	43	32	34	7	3
40-49 dB	124	50	10	12	15	10	9	8	0	7	3
50-59 dB	76	43	5	5	3	6	3	4	4	2	1
60 dB & Over	101	54	2	8	4	9	10	7	3	4	0
Unknown dB	132	64	16	10	10	9	8	7	7	1	0
Females All dB Levels	807	392	65	66	74	58	52	46	36	12	6
Under 40 dB	468	230	40	41	39	37	28	27	18	5	3
40-49 dB	78	28	5	10	14	2	5	4	5	4	1
50-59 dB	63	28	4	3	6	6	6	4	3	2	1
60 dB & Over	76	43	6	2	8	6	3	3	4	1	0
Unknown dB	122	63	10	10	7	7	10	8	6	0	1

*See Notes and Definitions, Page 28.

TABLE 3A. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	ALL TYPES OF SCHOOLS - ALL dB LEVELS /1 - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	4301	1964	311	347	348	322	294	253	225	143	94
Under 18	117	77	13	9	8	4	0	1	2	1	2
18 to 23	179	108	18	20	15	9	5	2	1	1	0
24 to 26	86	45	8	8	7	7	5	3	2	1	0
27 to 29	113	46	18	18	10	3	10	5	1	1	1
30 to 32	130	39	15	28	13	7	8	10	2	4	4
33 to 35	104	28	13	16	12	9	10	8	5	0	3
36 to 38	112	24	9	16	27	17	8	5	3	1	2
39 to 41	142	29	14	19	21	13	20	11	8	6	1
42 to 47	217	49	20	22	25	22	23	20	17	15	4
48 to 53	158	22	11	12	16	10	26	26	15	12	8
54 to 59	176	30	15	13	13	23	19	14	19	13	17
60 to 71	219	24	11	17	14	26	30	22	32	24	19
72 to 83	163	11	17	18	24	13	15	20	17	19	9
84 to 95	90	4	6	8	14	15	6	10	15	9	3
96 & Over	155	3	5	15	23	25	25	23	19	12	5
Unknown	2140	1425	118	108	106	119	84	73	67	24	16

/1 Includes Persons For Whom Threshold Levels Were Not Reported

* See Notes and Definitions, Page 28.

TABLE 3B. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	ALL TYPES OF SCHOOLS - UNDER 40 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	1110	536	91	101	88	87	73	61	54	12	7
Under 18	21	20	0	0	1	0	0	0	0	0	0
18 to 23	34	30	2	1	0	1	0	0	0	0	0
24 to 26	17	14	1	1	1	0	0	0	0	0	0
27 to 29	28	23	1	2	1	0	0	1	0	0	0
30 to 32	28	20	4	0	1	1	0	2	0	0	0
33 to 35	30	18	2	3	3	1	0	1	2	0	0
36 to 38	19	15	0	2	1	1	0	0	0	0	0
39 to 41	20	12	1	3	3	1	0	0	0	0	0
42 to 47	61	34	7	7	6	4	1	1	1	0	0
48 to 53	40	18	6	6	3	2	3	1	1	0	0
54 to 59	47	20	9	5	4	3	3	2	1	0	0
60 to 71	49	14	5	12	6	4	2	3	3	0	0
72 to 83	60	7	10	13	10	6	7	5	1	1	0
84 to 95	38	2	4	7	8	9	2	3	2	1	0
96 & Over	82	2	1	7	16	13	16	12	9	5	1
Unknown	536	287	38	32	24	41	39	30	34	5	6

* See Notes and Definitions, Page 28.

TABLE 3C. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	ALL TYPES OF SCHOOLS - 40 to 49 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	261	103	20	27	36	17	15	15	10	12	6
Under 18	4	4	0	0	0	0	0	0	0	0	0
18 to 23	11	5	2	1	3	0	0	0	0	0	0
24 to 26	7	5	0	0	1	0	0	1	0	0	0
27 to 29	6	2	1	2	0	0	0	0	0	1	0
30 to 32	8	4	0	1	1	0	1	0	1	0	0
33 to 35	7	1	3	1	0	0	1	1	0	0	0
36 to 38	5	1	1	2	1	0	0	0	0	0	0
39 to 41	6	0	1	1	2	2	0	0	0	0	0
42 to 47	10	4	0	1	1	2	1	0	0	0	1
48 to 53	9	1	0	2	4	0	0	0	1	0	1
54 to 59	11	4	1	1	2	1	2	0	0	0	0
60 to 71	14	1	1	2	1	3	2	1	2	1	0
72 to 83	7	1	0	1	4	0	0	0	1	0	0
84 to 95	7	0	0	1	3	1	0	1	0	1	0
96 & Over	9	0	2	2	1	0	2	0	2	0	0
Unknown	140	70	8	9	12	8	6	11	3	9	4

* See Notes and Definitions, Page 28.

TABLE 3D. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	ALL TYPES OF SCHOOLS - 50 to 59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	284	129	17	15	19	28	18	13	28	12	5
Under 18	7	7	0	0	0	0	0	0	0	0	0
18 to 23	14	9	2	2	0	1	0	0	0	0	0
24 to 26	4	2	1	0	0	0	0	0	1	0	0
27 to 29	5	1	1	1	0	0	1	0	0	0	1
30 to 32	8	2	0	3	1	0	0	1	0	1	0
33 to 35	4	2	0	0	0	1	0	0	1	0	0
36 to 38	7	3	0	0	2	1	1	0	0	0	0
39 to 41	9	2	0	1	1	0	1	1	2	1	0
42 to 47	15	0	3	1	2	1	2	1	3	2	0
48 to 53	8	0	0	0	1	1	3	1	2	0	0
54 to 59	13	1	1	1	0	4	1	0	1	2	2
60 to 71	15	0	1	0	0	3	2	1	6	2	0
72 to 83	6	0	1	0	1	1	0	1	1	0	1
84 to 95	8	1	0	0	0	2	0	0	4	1	0
96 & Over	11	0	1	1	1	2	2	2	2	0	0
Unknown	150	99	6	5	10	11	5	5	5	3	1

* See Notes and Definitions, Page 28.

TABLE 3E. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	ALL TYPES OF SCHOOLS _ 60 dB AND OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	2102	870	146	171	173	164	157	138	115	96	72
Under 18	73	40	11	7	5	4	0	1	2	1	2
18 to 23	102	54	10	14	9	7	4	2	1	1	0
24 to 26	52	18	6	7	5	7	5	2	1	1	0
27 to 29	67	19	14	11	7	3	8	4	1	0	0
30 to 32	73	9	8	20	9	6	7	6	1	3	4
33 to 35	56	6	7	11	9	5	8	5	2	0	3
36 to 38	69	2	8	11	22	13	5	3	3	1	1
39 to 41	97	7	12	14	14	9	19	10	6	5	1
42 to 47	112	3	7	13	14	14	17	17	12	12	3
48 to 53	91	1	5	3	6	7	18	23	10	11	7
54 to 59	87	0	3	4	7	13	11	10	15	9	15
60 to 71	121	3	1	1	5	15	22	17	20	19	18
72 to 83	70	0	2	1	8	4	6	12	13	16	8
84 to 95	32	1	0	0	1	2	4	6	9	6	3
96 & Over	29	0	1	1	1	4	1	6	5	6	4
Unknown	971	707	51	53	51	51	22	14	14	5	3

* See Notes and Definitions, Page 28.

TABLE 3F. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	RESIDENTIAL SCHOOLS - ALL dB LEVELS /1 - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	2074	854	130	159	170	157	148	140	127	109	80
Under 18	64	32	10	9	6	2	0	1	1	1	2
18 to 23	72	26	11	14	9	4	5	2	0	1	0
24 to 26	51	17	6	6	6	6	5	2	2	1	0
27 to 29	66	17	12	11	8	3	8	5	1	0	1
30 to 32	77	11	7	21	9	7	7	5	2	4	4
33 to 35	56	6	8	10	8	7	6	7	1	0	3
36 to 38	73	4	5	11	23	15	6	4	2	1	2
39 to 41	102	3	12	14	17	12	19	10	8	6	1
42 to 47	124	1	9	14	16	16	16	19	15	14	4
48 to 53	95	0	4	3	6	6	20	25	12	11	8
54 to 59	95	0	2	3	5	14	14	12	17	13	15
60 to 71	127	0	0	1	5	12	24	17	27	22	19
72 to 83	67	0	0	0	6	2	3	14	16	17	9
84 to 95	34	1	0	0	0	2	3	6	12	7	3
96 & Over	23	0	0	0	0	2	1	5	5	6	4
Unknown	948	736	44	42	46	47	11	6	6	5	5

/1 Includes Persons For Whom Threshold Levels Were Not Reported

* See Notes and Definitions, Page 28.

TABLE 3G. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	RESIDENTIAL SCHOOLS - UNDER 40dB - BOTH SEXES										
	AGES IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	20	9	0	1	1	3	1	2	2	0	1
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 23	0	0	0	0	0	0	0	0	0	0	0
24 to 26	0	0	0	0	0	0	0	0	0	0	0
27 to 29	2	0	0	0	1	0	0	1	0	0	0
30 to 32	1	0	0	0	0	1	0	0	0	0	0
33 to 35	0	0	0	0	0	0	0	0	0	0	0
36 to 38	1	1	0	0	0	0	0	0	0	0	0
39 to 41	0	0	0	0	0	0	0	0	0	0	0
42 to 47	2	0	0	1	0	1	0	0	0	0	0
48 to 53	2	0	0	0	0	1	1	0	0	0	0
54 to 59	0	0	0	0	0	0	0	0	0	0	0
60 to 71	1	0	0	0	0	0	0	1	0	0	0
72 to 83	0	0	0	0	0	0	0	0	0	0	0
84 to 95	1	0	0	0	0	0	0	0	1	0	0
96 & Over	0	0	0	0	0	0	0	0	0	0	0
Unknown	10	8	0	0	0	0	0	0	1	0	1

* See Notes and Definitions, Page 28.

TABLE 3H. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	RESIDENTIAL SCHOOLS - 40 to 49 dB - BOTH SEXES										
	AGES IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	44	18	2	3	5	4	1	3	5	1	2
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 23	2	0	1	0	1	0	0	0	0	0	0
24 to 26	3	1	0	0	1	0	0	1	0	0	0
27 to 29	1	1	0	0	0	0	0	0	0	0	0
30 to 32	4	1	0	0	1	0	1	0	1	0	0
33 to 35	1	0	0	0	0	0	0	1	0	0	0
36 to 38	2	0	0	2	0	0	0	0	0	0	0
39 to 41	5	0	1	0	2	2	0	0	0	0	0
42 to 47	1	0	0	0	0	0	0	0	0	0	1
48 to 53	2	0	0	0	0	0	0	0	1	0	1
54 to 59	2	0	0	1	0	1	0	0	0	0	0
60 to 71	4	0	0	0	0	1	0	0	2	1	0
72 to 83	1	0	0	0	0	0	0	0	1	0	0
84 to 95	0	0	0	0	0	0	0	0	0	0	0
96 & Over	0	0	0	0	0	0	0	0	0	0	0
Unknown	16	15	0	0	0	0	0	1	0	0	0

* See Notes and Definitions, Page 28.

TABLE 31. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS (IN MONTHS)	RESIDENTIAL SCHOOLS - 50 to 59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	109	39	5	5	8	11	7	4	19	8	3
Under 18	1	1	0	0	0	0	0	0	0	0	0
18 to 23	4	1	2	1	0	0	0	0	0	0	0
24 to 26	3	2	0	0	0	0	0	0	1	0	0
27 to 29	1	0	0	0	0	0	0	0	0	0	1
30 to 32	2	0	0	1	0	0	0	0	0	1	0
33 to 35	0	0	0	0	0	0	0	0	0	0	0
36 to 38	4	0	0	0	2	1	1	0	0	0	0
39 to 41	7	0	0	1	1	0	1	1	2	1	0
42 to 47	11	0	2	0	2	1	1	1	3	1	0
48 to 53	3	0	0	0	0	0	1	1	1	0	0
54 to 59	7	0	0	0	0	2	1	0	1	2	1
60 to 71	11	0	0	0	0	1	2	1	5	2	0
72 to 83	2	0	0	0	0	0	0	0	1	0	1
84 to 95	5	0	0	0	0	1	0	0	3	1	0
96 & Over	1	0	0	0	0	0	0	0	1	0	0
Unknown	47	35	1	2	3	5	0	0	1	0	0

* See Notes and Definitions, Page 28.

TABLE 3J. ADJUSTED BATTERY MEDIANS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED BATTERY MEDIANS	RESIDENTIAL SCHOOLS - 60 dB AND OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL BATTERY MEDIANS	1666	625	115	140	145	132	131	120	97	90	71
Under 18	56	29	9	7	4	2	0	1	1	1	2
18 to 23	61	22	8	13	7	4	4	2	0	1	0
24 to 26	43	12	6	6	5	6	5	1	1	1	0
27 to 29	59	16	12	9	7	3	7	4	1	0	0
30 to 32	61	7	5	17	8	6	6	4	1	3	4
33 to 35	49	5	7	9	8	5	6	5	1	0	3
36 to 38	59	2	5	8	20	13	4	3	2	1	1
39 to 41	88	3	11	13	13	9	18	9	6	5	1
42 to 47	103	1	6	13	12	13	14	17	12	12	3
48 to 53	82	0	4	3	4	5	17	23	9	10	7
54 to 59	77	0	2	2	5	10	11	10	14	9	14
60 to 71	106	0	0	1	4	10	21	15	20	17	18
72 to 83	59	0	0	0	6	2	3	12	13	15	8
84 to 95	28	1	0	0	0	1	3	6	8	6	3
96 & Over	20	0	0	0	0	2	1	4	4	5	4
Unknown	715	527	40	39	42	41	11	4	4	4	3

* See Notes and Definitions, Page 28.

TABLE 4A. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR*

ADJUSTED READING LEVELS (IN MONTHS)	ALL TYPES OF SCHOOLS - ALL dB LEVELS /1 - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	4301	1964	311	347	348	322	294	253	225	143	94
Under 18	81	60	2	6	3	3	0	2	4	1	0
18 to 23	192	131	16	16	12	8	4	1	2	1	1
24 to 26	81	44	7	9	10	6	2	2	0	1	0
27 to 29	108	45	19	12	12	3	7	5	0	5	0
30 to 32	166	68	18	28	20	9	10	6	3	2	2
33 to 35	130	54	17	17	16	10	6	5	1	2	2
36 to 38	102	26	9	13	13	13	10	11	3	4	0
39 to 41	130	30	13	19	18	19	12	7	7	3	2
42 to 47	138	31	9	13	19	24	18	3	12	7	2
48 to 53	107	7	9	13	10	22	6	11	9	11	9
54 to 59	88	19	5	8	7	10	14	6	10	7	2
60 to 71	107	13	2	5	10	10	14	17	15	8	13
72 to 83	63	4	6	5	9	10	7	7	6	6	3
84 to 95	23	1	0	4	1	5	3	3	4	2	0
96 & Over	78	1	6	11	14	16	7	11	8	3	1
Unknown	2707	1430	173	168	174	154	174	156	141	80	57

/1 Includes Persons For Whom Threshold Levels Were Not Reported.

* See Notes and Definitions, Page 28.

TABLE 4B. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	ALL TYPES OF SCHOOLS - UNDER 40 dB(ASA) - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	1110	536	91	101	88	87	73	61	54	12	7
Under 18	9	7	0	2	0	0	0	0	0	0	0
18 to 23	21	19	1	1	0	0	0	0	0	0	0
24 to 26	5	3	1	1	0	0	0	0	0	0	0
27 to 29	10	8	2	0	0	0	0	0	0	0	0
30 to 32	12	9	0	1	2	0	0	0	0	0	0
33 to 35	17	9	4	0	2	1	0	1	0	0	0
36 to 38	9	6	0	0	1	0	0	2	0	0	0
39 to 41	11	5	1	3	1	1	0	0	0	0	0
42 to 47	25	10	2	5	4	1	3	0	0	0	0
48 to 53	15	4	6	1	0	1	0	2	1	0	0
54 to 59	20	9	1	2	3	2	3	0	0	0	0
60 to 71	19	8	1	3	2	2	0	2	1	0	0
72 to 83	23	2	3	5	4	2	4	2	1	0	0
84 to 95	7	1	0	2	0	1	1	1	1	0	0
96 & Over	39	0	2	5	10	4	5	7	5	0	1
Unknown	868	436	67	70	59	72	57	44	45	12	6

* See Notes and Definitions, Page 28.

TABLE 4C. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	ALL TYPES OF SCHOOLS - 40 to 49 dB(ASA) - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	261	103	20	27	36	17	15	15	10	12	6
Under 18	2	2	0	0	0	0	0	0	0	0	0
18 to 23	4	3	1	0	0	0	0	0	0	0	0
24 to 26	4	1	1	0	2	0	0	0	0	0	0
27 to 29	5	2	0	1	1	0	0	0	0	1	0
30 to 32	5	1	0	0	1	0	0	2	0	0	1
33 to 35	3	0	1	2	0	0	0	0	0	0	0
36 to 38	5	1	2	1	1	0	0	0	0	0	0
39 to 41	3	2	0	1	0	0	0	0	0	0	0
42 to 47	9	2	0	2	1	3	0	0	1	0	0
48 to 53	3	1	0	0	1	0	0	1	0	0	0
54 to 59	7	2	0	2	0	1	2	0	0	0	0
60 to 71	4	0	0	0	1	1	1	0	1	0	0
72 to 83	1	0	0	0	1	0	0	0	0	0	0
84 to 95	2	0	0	0	1	1	0	0	0	0	0
96 & Over	6	0	3	1	0	1	0	0	0	1	0
Unknown	198	86	12	17	26	10	12	12	8	10	5

* See Notes and Definitions, Page 28.

TABLE 4D. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	ALL TYPES OF SCHOOLS - 50 to 59 dB(ASA) - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	284	129	17	15	19	28	18	13	28	12	5
Under 18	6	5	0	0	0	1	0	0	0	0	0
18 to 23	10	6	1	0	1	1	0	0	1	0	0
24 to 26	7	3	0	1	2	0	1	0	0	0	0
27 to 29	8	5	0	1	1	0	0	0	0	1	0
30 to 32	8	3	2	2	1	0	0	0	0	0	0
33 to 35	6	1	2	0	1	1	1	0	0	0	0
36 to 38	7	1	0	0	0	0	2	1	2	1	0
39 to 41	4	0	1	1	0	1	0	0	1	0	0
42 to 47	15	2	0	0	2	4	3	1	1	2	0
48 to 53	5	0	0	0	0	1	1	1	1	0	1
54 to 59	6	1	1	0	0	1	0	0	1	1	1
60 to 71	13	0	0	1	1	1	2	1	6	1	0
72 to 83	3	0	0	0	0	1	0	1	0	0	1
84 to 95	4	0	0	0	0	2	0	0	2	0	0
96 & Over	4	0	0	1	1	0	0	1	1	0	0
Unknown	178	102	10	8	9	14	8	7	12	6	2

* See Notes and Definitions, Page 28.

TABLE 4E. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	ALL TYPES OF SCHOOLS - 60 dB(ASA) & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	2102	870	146	171	173	164	157	138	115	96	72
Under 18	57	40	2	4	2	2	0	2	4	1	0
18 to 23	135	89	12	12	8	7	3	1	1	1	1
24 to 26	60	33	4	7	6	6	1	2	0	1	0
27 to 29	71	25	16	8	5	3	6	5	0	3	0
30 to 32	115	44	14	21	15	7	8	3	2	1	0
33 to 35	89	35	8	13	13	6	5	4	1	2	2
36 to 38	69	12	7	12	9	13	7	6	1	2	0
39 to 41	103	20	11	14	17	15	9	6	6	3	2
42 to 47	75	11	6	6	10	16	10	2	8	4	2
48 to 53	70	1	3	10	9	18	4	4	6	8	7
54 to 59	41	1	1	3	4	6	9	6	7	3	1
60 to 71	63	1	0	0	6	6	10	13	7	7	13
72 to 83	26	1	0	0	3	5	2	2	5	6	2
84 to 95	4	0	0	0	0	0	0	2	1	1	0
96 & Over	15	0	0	1	1	5	1	3	2	2	0
Unknown	1109	557	62	60	65	49	82	77	64	51	42

* See Notes and Definitions, Page 28.

TABLE 4F. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	RESIDENTIAL SCHOOLS - ALL dB LEVELS /1 - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	2074	854	130	159	170	157	148	140	127	109	80
Under 18	54	42	2	3	2	2	0	1	1	1	0
18 to 23	128	81	12	13	10	5	4	0	1	1	1
24 to 26	51	33	1	6	6	3	1	0	0	1	0
27 to 29	72	25	15	8	7	3	6	4	0	4	0
30 to 32	137	55	16	24	16	8	6	5	3	2	2
33 to 35	96	40	11	12	11	9	4	4	1	2	2
36 to 38	75	12	7	11	11	13	9	7	2	3	0
39 to 41	97	17	11	12	14	16	9	7	7	2	2
42 to 47	84	9	5	6	12	18	11	3	11	7	2
48 to 53	79	0	3	10	9	19	6	7	8	9	8
54 to 59	39	1	1	2	2	3	8	6	7	7	2
60 to 71	65	1	0	1	5	4	8	15	11	7	13
72 to 83	24	0	0	0	3	4	0	4	4	6	3
84 to 95	7	0	0	0	0	0	0	1	4	2	0
96 & Over	8	0	0	0	0	2	1	2	2	1	0
Unknown	1058	538	46	51	62	48	75	74	65	54	45

/1 Includes Persons For Whom Threshold Levels Were Not Reported.

* See Notes and Definitions, Page 28.

TABLE 4G. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	RESIDENTIAL SCHOOLS - UNDER 40 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	20	9	0	1	1	3	1	2	2	0	1
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 23	1	1	0	0	0	0	0	0	0	0	0
24 to 26	0	0	0	0	0	0	0	0	0	0	0
27 to 29	0	0	0	0	0	0	0	0	0	0	0
30 to 32	0	0	0	0	0	0	0	0	0	0	0
33 to 35	0	0	0	0	0	0	0	0	0	0	0
36 to 38	0	0	0	0	0	0	0	0	0	0	0
39 to 41	0	0	0	0	0	0	0	0	0	0	0
42 to 47	0	0	0	0	0	0	0	0	0	0	0
48 to 53	1	0	0	0	0	1	0	0	0	0	0
54 to 59	0	0	0	0	0	0	0	0	0	0	0
60 to 71	1	0	0	0	0	0	0	1	0	0	0
72 to 83	0	0	0	0	0	0	0	0	0	0	0
84 to 95	1	0	0	0	0	0	0	0	1	0	0
96 & Over	0	0	0	0	0	0	0	0	0	0	0
Unknown	16	8	0	1	1	2	1	1	1	0	1

* See Notes and Definitions, Page 28.

TABLE 4H. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	RESIDENTIAL SCHOOLS - 40 to 49 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	44	18	2	3	5	4	1	3	5	1	2
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 23	0	0	0	0	0	0	0	0	0	0	0
24 to 26	2	1	0	0	1	0	0	0	0	0	0
27 to 29	0	0	0	0	0	0	0	0	0	0	0
30 to 32	4	0	0	0	1	0	0	2	0	0	1
33 to 35	1	0	0	1	0	0	0	0	0	0	0
36 to 38	2	0	1	1	0	0	0	0	0	0	0
39 to 41	0	0	0	0	0	0	0	0	0	0	0
42 to 47	3	1	0	0	0	1	0	0	1	0	0
48 to 53	0	0	0	0	0	0	0	0	0	0	0
54 to 59	1	0	0	0	0	1	0	0	0	0	0
60 to 71	0	0	0	0	0	0	0	0	0	0	0
72 to 83	0	0	0	0	0	0	0	0	0	0	0
84 to 95	0	0	0	0	0	0	0	0	0	0	0
96 & Over	0	0	0	0	0	0	0	0	0	0	0
Unknown	31	16	1	1	3	2	1	1	4	1	1

* See Notes and Definitions, Page 28.

TABLE 41. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	RESIDENTIAL SCHOOLS - 50 to 59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	109	39	5	5	8	11	7	4	19	8	3
Under 18	3	2	0	0	0	1	0	0	0	0	0
18 to 23	5	3	0	0	1	0	0	0	1	0	0
24 to 26	3	2	0	1	0	0	0	0	0	0	0
27 to 29	3	1	0	0	1	0	0	0	0	1	0
30 to 32	6	2	2	1	1	0	0	0	0	0	0
33 to 35	3	1	1	0	0	1	0	0	0	0	0
36 to 38	4	1	0	0	0	0	2	0	1	0	0
39 to 41	2	0	1	0	0	0	0	0	1	0	0
42 to 47	9	0	0	0	1	3	1	1	1	2	0
48 to 53	4	0	0	0	0	1	1	1	1	0	0
54 to 59	4	0	0	0	0	1	0	0	1	1	1
60 to 71	8	0	0	1	0	0	1	1	4	1	0
72 to 83	2	0	0	0	0	1	0	0	0	0	1
84 to 95	2	0	0	0	0	0	0	0	2	0	0
96 & Over	1	0	0	0	0	0	0	0	1	0	0
Unknown	50	27	1	2	4	3	2	1	6	3	1

* See Notes and Definitions, Page 28.

TABLE 4J. ADJUSTED READING LEVELS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING LEVELS AND AGE: 1966-67 SCHOOL YEAR *

ADJUSTED READING LEVELS (IN MONTHS)	RESIDENTIAL SCHOOLS - 60 dB & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All Reading Levels	1666	625	115	140	145	132	131	120	97	90	71
Under 18	46	36	2	3	1	1	0	1	1	1	0
18 to 23	109	69	11	12	7	5	3	0	0	1	1
24 to 26	44	28	1	5	5	3	1	0	0	1	0
27 to 29	63	21	15	7	5	3	5	4	0	3	0
30 to 32	105	44	13	19	13	6	5	2	2	1	0
33 to 35	79	32	8	9	11	6	4	4	1	2	2
36 to 38	63	10	6	10	9	13	6	6	1	2	0
39 to 41	92	17	10	12	14	15	8	6	6	2	2
42 to 47	66	8	5	6	9	14	8	2	8	4	2
48 to 53	64	0	3	10	9	16	4	3	6	6	7
54 to 59	30	1	1	2	2	1	8	6	5	3	1
60 to 71	55	1	0	0	5	4	7	12	7	6	13
72 to 83	20	0	0	0	3	3	0	2	4	6	2
84 to 95	3	0	0	0	0	0	0	1	1	1	0
96 & Over	7	0	0	0	0	2	1	2	1	1	0
Unknown	820	358	40	45	52	40	71	69	54	50	41

* See Notes and Definitions, Page 28.

TABLE 5A. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	ALL TYPES OF SCHOOLS - ALL dB LEVELS/1 - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	4301	1964	311	347	348	322	294	253	225	143	94
UNDER 60	72	31	3	7	9	5	4	5	5	1	2
60 - 69	108	35	11	13	13	7	14	9	4	2	0
70 - 79	264	109	15	20	23	26	21	17	18	8	7
80 - 89	380	152	25	55	32	32	25	17	21	12	9
90 - 94	242	97	36	18	19	14	20	15	11	9	3
95 - 99	215	98	19	11	15	20	13	14	9	5	11
100 - 104	236	119	24	16	16	12	11	15	13	7	3
105 - 109	203	99	26	15	16	9	10	12	10	6	0
110 - 119	316	152	19	28	17	22	19	18	24	8	9
120 & OVER	202	107	10	15	14	15	10	17	11	3	0
UNKNOWN	2063	965	123	149	174	160	147	114	99	82	50

/1 Includes Persons for Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 5B. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR*

TOTAL I.Q. LEVELS	ALL TYPES OF SCHOOLS - UNDER 40 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	1110	536	91	101	88	87	73	61	54	12	7
UNDER 60	25	9	2	3	3	4	2	1	1	0	0
60 - 69	51	17	7	7	7	2	4	4	3	0	0
70 - 79	99	42	8	11	9	12	9	4	3	0	1
80 - 89	142	59	8	25	11	8	10	9	8	3	1
90 - 94	87	35	15	7	10	7	6	4	3	0	0
95 - 99	81	40	7	2	7	8	4	6	3	2	2
100 - 104	72	35	11	6	1	3	4	8	4	0	0
105 - 109	70	35	7	7	5	5	3	4	3	1	0
110 - 119	99	40	5	11	5	14	7	3	14	0	0
120 & OVER	55	25	4	5	6	4	2	6	3	0	0
UNKNOWN	329	199	17	17	24	20	22	12	9	6	3

* See Notes and Definitions, Page 28.

TABLE 5C. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	ALL TYPES OF SCHOOLS - 40-49 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	261	103	20	27	36	17	15	15	10	12	1
UNDER 60	7	4	0	0	2	0	0	0	0	0	1
60 - 69	15	3	2	3	2	0	1	2	0	2	0
70 - 79	24	5	1	4	5	2	4	0	1	1	1
80 - 89	36	12	3	6	5	4	1	1	2	1	1
90 - 94	19	9	2	0	3	1	1	0	1	2	0
95 - 99	15	5	0	2	3	0	0	3	1	1	0
100 - 104	26	11	1	3	5	1	2	0	3	0	0
105 - 109	10	0	3	0	1	2	1	2	0	1	0
110 - 119	13	8	0	1	2	1	0	1	0	0	0
120 & OVER	12	5	2	1	1	0	2	1	0	0	0
UNKNOWN	84	41	6	7	7	6	3	5	2	4	3

* See Notes and Definitions, Page 28.

TABLE 5D. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR*

TOTAL I.Q. LEVELS	ALL TYPES OF SCHOOLS - 50-59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	284	129	17	15	19	28	18	13	28	12	5
UNDER 60	13	6	1	2	0	0	0	1	2	1	0
60 - 69	11	4	0	0	1	2	3	0	1	0	0
70 - 79	28	11	4	1	0	4	1	0	5	1	1
80 - 89	30	13	1	3	2	2	2	3	3	0	1
90 - 94	17	7	3	0	1	2	1	0	1	2	0
95 - 99	12	9	2	0	0	0	0	0	1	0	0
100 - 104	15	8	0	2	0	2	1	1	0	1	0
105 - 109	14	7	2	0	2	0	0	2	0	1	0
110 - 119	15	9	1	1	2	0	0	1	1	0	0
120 & Over	6	2	0	1	0	2	0	1	0	0	0
UNKNOWN	123	53	3	5	11	14	10	4	14	6	3

*See Notes and Definitions, Page 28.

TABLE 5E. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	ALL TYPES OF SCHOOLS - 60 dB & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	2102	870	146	171	173	164	157	138	115	96	72
UNDER 60	20	9	0	1	1	1	2	3	2	0	1
60 - 69	23	6	2	2	3	3	5	2	0	0	0
70 - 79	97	42	1	4	7	8	5	12	9	6	3
80 - 89	141	56	9	19	12	14	10	2	7	6	6
90 - 94	95	37	13	8	4	4	10	8	3	5	3
95 - 99	84	35	9	5	3	8	6	5	2	2	9
100 - 104	92	50	6	2	9	3	4	5	5	5	3
105 - 109	76	40	9	4	7	1	4	2	6	3	0
110 - 119	145	78	7	12	5	4	9	11	4	6	9
120 & OVER	100	58	4	7	5	7	4	5	7	3	0
UNKNOWN	1229	459	86	107	117	111	98	83	70	60	38

*See Notes and Definitions, Page 28.

TABLE 5F. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	RESIDENTIAL SCHOOLS - ALL dB LEVELS[/1] - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	2074	854	130	159	170	157	148	140	127	109	80
UNDER 60	12	4	0	2	1	0	1	1	1	1	1
60 - 69	17	6	1	1	1	1	3	3	1	0	0
70 - 79	66	26	1	2	3	3	5	9	7	6	4
80 - 89	113	47	5	10	12	9	7	3	6	8	6
90 - 94	75	27	9	7	2	3	9	6	4	5	3
95 - 99	72	32	6	4	3	5	5	5	3	0	9
100 - 104	87	40	7	3	8	4	5	5	6	6	3
105 - 109	67	31	9	5	6	2	3	3	6	2	0
110 - 119	136	72	7	9	6	5	9	9	4	7	8
120 & OVER	85	43	4	7	6	7	3	6	6	3	0
UNKNOWN	1344	526	81	109	122	118	98	90	83	71	46

[/1] Includes Persons for Whom Threshold Levels Were Not Reported

*See Notes and Definitions, Page 28.

TABLE 5G. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR*

TOTAL I.Q. LEVELS	RESIDENTIAL SCHOOLS - UNDER 40 dB - BOTH SEXES										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	20	9	0	1	1	3	1	2	2	0	1
UNDER 60	0	0	0	0	0	0	0	0	0	0	0
60 - 69	2	2	0	0	0	0	0	0	0	0	0
70 - 79	2	1	0	0	0	0	0	0	1	0	0
80 - 89	2	1	0	0	1	0	0	0	0	0	0
90 - 94	0	0	0	0	0	0	0	0	0	0	0
95 - 99	1	1	0	0	0	0	0	0	0	0	0
100 - 104	2	0	0	0	0	0	1	1	0	0	0
105 - 109	1	0	0	1	0	0	0	0	0	0	0
110 - 119	2	1	0	0	0	1	0	0	0	0	0
120 & OVER	0	0	0	0	0	0	0	0	0	0	0
UNKNOWN	8	3	0	0	0	2	0	1	1	0	1

*See Notes and Definitions, Page 28.

TABLE 5H. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	RESIDENTIAL SCHOOLS - 40-49 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	44	18	2	3	5	4	1	3	5	1	2
UNDER 60	0	0	0	0	0	0	0	0	0	0	0
60 - 69	1	0	0	0	0	0	0	1	0	0	0
70 - 79	0	0	0	0	0	0	0	0	0	0	0
80 - 89	5	3	0	0	1	1	0	0	0	0	0
90 - 94	0	0	0	0	0	0	0	0	0	0	0
95 - 99	2	2	0	0	0	0	0	0	0	0	0
100 - 104	8	3	0	0	1	0	1	0	3	0	0
105 - 109	1	0	1	0	0	0	0	0	0	0	0
110 - 119	2	1	0	0	0	1	0	0	0	0	0
120 & OVER	1	1	0	0	0	0	0	0	0	0	0
UNKNOWN	24	8	1	3	3	2	0	2	2	1	2

*Se Notes and Definitions, Page 28.

TABLE 51. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	RESIDENTIAL SCHOOLS - 50-59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	109	39	5	5	8	11	7	4	19	8	3
UNDER 60	3	0	0	1	0	0	0	0	1	1	0
60 - 69	2	1	0	0	0	0	0	0	1	0	0
70 - 79	6	2	0	0	0	0	0	0	2	1	1
80 - 89	6	4	0	0	0	0	1	0	1	0	0
90 - 94	4	1	0	0	0	0	1	0	1	1	0
95 - 99	4	2	1	0	0	0	0	0	1	0	0
100 - 104	5	4	0	0	0	1	0	0	0	0	0
105 - 109	5	3	0	0	1	0	0	1	0	0	0
110 - 119	6	4	1	0	0	0	0	0	1	0	0
120 & OVER	3	1	0	0	0	2	0	0	0	0	0
UNKNOWN	65	17	3	4	7	8	5	3	11	5	2

* See Notes and Definitions, Page 28.

TABLE 5J. INTELLIGENCE QUOTIENTS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING LEVELS, AND AGE: 1966-67 SCHOOL YEAR *

TOTAL I.Q. LEVELS	RESIDENTIAL SCHOOLS - 60 dB & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
ALL LEVELS	1666	625	115	140	145	132	131	120	97	90	71
UNDER 60	8	4	0	1	0	0	1	1	0	0	1
60 - 69	10	1	1	1	1	1	3	2	0	0	0
70 - 79	56	23	1	2	3	3	4	8	4	5	3
80 - 89	88	33	5	10	10	6	6	1	5	6	6
90 - 94	60	21	8	6	2	3	7	4	2	4	3
95 - 99	61	25	5	4	2	4	5	5	2	0	9
100 - 104	61	27	5	1	7	3	3	4	3	5	3
105 - 109	52	22	8	3	5	1	3	2	6	2	0
110 - 119	114	60	5	8	5	3	8	9	2	6	8
120 & OVER	74	36	4	7	5	5	3	5	6	3	0
UNKNOWN	1082	373	73	97	105	103	88	79	67	59	38

*See Notes and Definitions, Page 28.

TABLE 6A. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR *

TOTAL YEARS ATTENDED ALL SCHOOLS	ALL TYPES OF SCHOOLS - ALL dB LEVELS [1] - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	4301	1964	311	347	348	322	294	253	225	143	94
0 - 2 YEARS	973	948	7	5	4	5	1	0	2	1	0
3 YEARS	336	324	8	1	0	1	0	0	1	1	0
4 YEARS	307	255	34	11	3	1	1	0	2	0	0
5 YEARS	292	123	98	53	12	1	2	2	1	0	0
6 YEARS	285	66	64	92	50	6	7	0	0	0	0
7 YEARS	294	13	36	77	107	53	8	0	0	0	0
8 YEARS	267	1	9	40	68	91	43	8	6	1	0
9 YEARS	228	0	6	4	38	51	80	38	7	3	1
10 YEARS	233	4	0	4	10	50	62	67	27	8	1
11 YEARS	164	0	0	0	0	8	27	43	52	31	3
12 YEARS	119	0	1	0	0	3	10	27	48	22	8
13 YEARS	123	0	0	0	0	0	4	11	27	38	43
UNKNOWN	680	230	48	60	56	52	49	57	52	38	38

[1] Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28

TABLE 6B. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

TOTAL YEARS ATTENDED ALL SCHOOLS	ALL TYPES OF SCHOOLS - UNDER 40 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	1110	536	91	101	88	87	73	61	54	12	7
0 - 2 YEARS	305	296	2	3	0	2	1	0	1	0	0
3 YEARS	106	102	2	1	0	0	0	0	0	1	0
4 YEARS	101	74	20	5	0	0	0	0	2	0	0
5 YEARS	97	28	45	19	5	0	0	0	0	0	0
6 YEARS	67	6	12	33	8	4	4	0	0	0	0
7 YEARS	91	0	2	22	44	19	4	0	0	0	0
8 YEARS	86	0	1	7	17	39	15	6	1	0	0
9 YEARS	59	0	1	0	4	10	28	12	2	2	0
10 YEARS	53	1	0	0	1	5	10	23	10	3	0
11 YEARS	40	0	0	0	0	3	3	11	18	5	0
12 YEARS	17	0	0	0	0	0	1	3	10	1	2
13 YEARS	6	0	0	0	0	0	0	0	4	0	2
UNKNOWN	82	29	6	11	9	5	7	6	6	0	3

*See Notes and Definitions, Page 28.

TABLE 6C. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , AGE AND HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR *

TOTAL YEARS ATTENDED ALL SCHOOLS	ALL TYPES OF SCHOOLS - 40-59 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	545	232	37	42	55	45	33	28	38	24	11
0 - 2 YEARS	129	127	0	0	0	1	0	0	1	0	0
3 YEARS	40	38	1	0	0	0	0	0	1	0	0
4 YEARS	38	29	5	3	1	0	0	0	0	0	0
5 YEARS	36	8	14	11	1	1	0	1	0	0	0
6 YEARS	44	6	7	15	13	2	1	0	0	0	0
7 YEARS	36	0	1	8	16	10	1	0	0	0	0
8 YEARS	28	0	0	0	8	8	8	1	3	0	0
9 YEARS	28	0	1	0	4	7	8	4	3	0	1
10 YEARS	38	2	0	2	1	8	8	12	3	2	0
11 YEARS	22	0	0	0	0	0	1	2	7	11	1
12 YEARS	13	0	0	0	0	0	1	1	6	3	2
13 YEARS	10	0	0	0	0	0	0	0	1	5	4
UNKNOWN	83	22	8	3	11	8	5	7	13	3	3

*See Notes and Definitions, Page 28.

TABLE 6D. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR *

TOTAL YEARS ATTENDED ALL SCHOOLS	ALL TYPES OF SCHOOLS - 60 dB & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	2102	870	146	171	173	164	157	138	115	96	72
0 - 2 YEARS	351	340	3	2	4	1	0	0	0	1	0
3 YEARS	138	132	5	0	0	1	0	0	0	0	0
4 YEARS	131	121	5	2	1	1	1	0	0	0	0
5 YEARS	130	78	27	19	4	0	1	0	1	0	0
6 YEARS	148	51	35	36	25	0	1	0	0	0	0
7 YEARS	135	13	30	36	34	19	3	0	0	0	0
8 YEARS	135	1	8	31	37	39	15	1	2	1	0
9 YEARS	119	0	3	3	28	27	37	18	2	1	0
10 YEARS	121	0	0	2	8	35	37	21	14	3	1
11 YEARS	82	0	0	0	0	5	18	24	20	14	1
12 YEARS	72	0	0	0	0	3	7	23	23	12	4
13 YEARS	105	0	0	0	0	0	4	11	22	32	36
UNKNOWN	435	134	30	40	32	33	33	40	31	32	30

*See Notes and Definitions, Page 28.

TABLE 6E. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

TOTAL YEARS ATTENDED ALL SCHOOLS	RESIDENTIAL SCHOOLS - ALL dB LEVELS[1] - BOTH SEXES										
		AGE IN YEARS									
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	2074	854	130	159	170	157	148	140	127	109	80
0 - 2 YEARS	341	331	3	3	3	1	0	0	0	0	0
3 YEARS	134	131	3	0	0	0	0	0	0	0	0
4 YEARS	117	104	7	3	1	1	1	0	0	0	0
5 YEARS	110	69	24	15	1	0	1	0	0	0	0
6 YEARS	130	38	32	35	23	0	2	0	0	0	0
7 YEARS	112	7	23	32	32	18	0	0	0	0	0
8 YEARS	124	1	6	28	38	35	12	1	2	1	0
9 YEARS	114	0	2	3	29	27	35	16	1	1	0
10 YEARS	118	1	0	2	7	33	35	27	11	1	1
11 YEARS	91	0	0	0	0	5	20	24	23	18	1
12 YEARS	76	0	0	0	0	1	6	20	27	17	5
13 YEARS	105	0	0	0	0	0	3	10	19	35	38
UNKNOWN	502	172	30	38	36	36	33	42	44	36	35

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[1] Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes And Definitions, Page 28

TABLE 6F. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

TOTAL YEARS ATTENDED ALL SCHOOLS	RESIDENTIAL SCHOOLS - UNDER 40 dB - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	20	9	0	1	1	3	1	2	2	0	1
0 - 2 YEARS	4	3	0	1	0	0	0	0	0	0	0
3 YEARS	1	1	0	0	0	0	0	0	0	0	0
4 YEARS	1	1	0	0	0	0	0	0	0	0	0
5 YEARS	1	1	0	0	0	0	0	0	0	0	0
6 YEARS	1	1	0	0	0	0	0	0	0	0	0
7 YEARS	0	0	0	0	0	0	0	0	0	0	0
8 YEARS	2	0	0	0	1	1	0	0	0	0	0
9 YEARS	0	0	0	0	0	0	0	0	0	0	0
10 YEARS	1	0	0	0	0	0	1	0	0	0	0
11 YEARS	2	0	0	0	0	1	0	1	0	0	0
12 YEARS	0	0	0	0	0	0	0	0	0	0	0
13 YEARS	0	0	0	0	0	0	0	0	0	0	0
UNKNOWN	7	2	0	0	0	1	0	1	2	0	1

*See Notes and Definitions, Page 28

TABLE 6G. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, AGE & HEARING THRESHOLD LEVELS; 1966-67 SCHOOL YEAR*

TOTAL YEARS ATTENDED ALL SCHOOLS	RESIDENTIAL SCHOOLS - 40-59 dB - BOTH SEXES										
		AGE IN YEARS									
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	153	57	7	8	13	15	8	7	24	9	5
0 - 2 YEARS	26	26	0	0	0	0	0	0	0	0	0
3 YEARS	13	13	0	0	0	0	0	0	0	0	0
4 YEARS	9	8	0	1	0	0	0	0	0	0	0
5 YEARS	5	1	2	2	0	0	0	0	0	0	0
6 YEARS	7	1	1	2	2	0	1	0	0	0	0
7 YEARS	5	0	0	1	2	2	0	0	0	0	0
8 YEARS	4	0	0	0	0	3	0	0	1	0	0
9 YEARS	8	0	0	0	3	3	1	1	0	0	0
10 YEARS	13	1	0	0	0	3	3	3	3	0	0
11 YEARS	8	0	0	0	0	0	0	0	4	4	0
12 YEARS	5	0	0	0	0	0	0	0	4	0	1
13 YEARS	3	0	0	0	0	0	0	0	0	2	1
UNKNOWN	47	7	4	2	6	4	3	3	12	3	3

*See Notes and Definitions, Page 28

TABLE 6H. TOTAL YEARS ATTENDED ALL SCHOOLS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , AGE & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

TOTAL YEARS ATTENDED ALL SCHOOLS	RESIDENTIAL SCHOOLS - 60 dB & OVER - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
TOTAL	1666	625	115	140	145	132	131	120	97	90	71
0 - 2 YEARS	224	215	3	2	3	1	0	0	0	0	0
3 YEARS	92	89	3	0	0	0	0	0	0	0	0
4 YEARS	97	88	5	2	0	1	1	0	0	0	0
5 YEARS	101	64	22	13	1	0	1	0	0	0	0
6 YEARS	112	34	28	30	20	0	0	0	0	0	0
7 YEARS	100	7	22	28	28	15	0	0	0	0	0
8 YEARS	112	1	6	27	34	29	12	1	1	1	0
9 YEARS	100	0	2	3	25	22	32	14	1	1	0
10 YEARS	96	0	0	2	7	30	30	17	8	1	1
11 YEARS	77	0	0	0	0	4	18	22	18	14	1
12 YEARS	63	0	0	0	0	1	6	20	21	11	4
13 YEARS	100	0	0	0	0	0	3	10	19	32	36
UNKNOWN	392	127	24	33	27	29	28	36	29	30	29

*See Notes and Definitions, Page 28.

TABLE 7A. AGE AT ONSET OF HEARING LOSS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL AND HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

AGE AT ONSET OF HEARING LOSS	ALL TYPES OF SCHOOLS - BOTH SEXES				
	HEARING THRESHOLD LEVELS IN dB (ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
Total	4301	1110	545	2102	544
At Birth	2102	348	306	1242	206
Under 1 Year	135	3	13	98	21
1 - 2 Years	279	17	24	206	32
3 - 5 Years	153	54	25	59	15
6 - 9 Years	108	68	15	19	6
10 Years and Over	30	23	3	3	1
Not Known	580	305	63	68	144
Not Reported	914	292	96	407	119

*See Notes and Definitions, Page 28.

TABLE 7B. AGE AT ONSET OF HEARING LOSS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL AND HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

AGE AT ONSET OF HEARING LOSS	RESIDENTIAL SCHOOLS - BOTH SEXES				
	HEARING THRESHOLD LEVELS IN dB(ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
Total	2074	20	153	1666	235
At Birth	1186	9	80	977	120
Under 1 Year	99	1	4	79	15
1 - 2 Years	203	2	10	170	21
3 - 5 Years	58	0	7	45	6
6 - 9 Years	16	0	0	15	1
10 Years and Over	3	0	0	3	0
Not Known	58	2	10	41	5
Not Reported	461	6	42	336	67

*See Notes and Definitions, Page 28.

TABLE 8A. OTHER HANDICAPPING CONDITIONS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

OTHER HANDICAPPING CONDITIONS	ALL TYPES OF SCHOOLS - BOTH SEXES				
	HEARING THRESHOLD LEVELS IN dB (ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
TOTAL	4301	1110	545	2102	544
None (So Stated)	261	3	18	185	55
Cerebral Palsy	62	8	13	30	11
Severe Visual	75	10	11	44	10
Mental Retardation	96	14	15	52	15
Aphasia	13	4	0	6	3
Cleft Lip or Palate	18	10	1	6	1
Emotional Problems	77	5	8	54	10
Brain Damage, Other	18	5	4	4	5
Other	62	10	7	39	6
Not Reported	3619	1041	468	1682	428

*See Notes and Definitions, Page 28.

TABLE 8B. OTHER HANDICAPPING CONDITIONS OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA BY TYPE OF SCHOOL , & HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR*

OTHER HANDICAPPING CONDITIONS	RESIDENTIAL SCHOOLS - BOTH SEXES				
	HEARING THRESHOLD LEVELS IN dB (ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
TOTAL	2074	20	153	1666	235
None (So Stated)	227	2	12	164	49
Cerebral Palsy	35	0	5	24	6
Severe Visual	46	0	5	33	8
Mental Retardation	55	1	4	43	7
Aphasia	8	1	0	5	2
Cleft Lip or Palate	7	0	1	6	0
Emotional Problems	61	0	7	46	8
Brain Damage, Other	5	0	0	4	1
Other	33	0	2	29	2
Not Reported	1597	16	117	1312	152

*See Notes and Definitions, Page 28.

TABLE 9A. ABILITY TO HEAR & UNDERSTAND SPEECH[1] WITHOUT USE OF HEARING AID BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR.*

HEARING THRESHOLD LEVELS IN dB(ASA) & ABILITY TO HEAR & UNDERSTAND SPEECH WITHOUT USE OF HEARING AID[1]	ALL TYPES OF SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels[2]	4301	1964	311	347	348	322	294	253	225	143	94
Can Hear & Understand Most Speech	1134	518	88	102	97	88	84	67	61	17	12
Some Speech	1053	501	84	74	89	75	74	55	54	29	18
None	1545	619	103	138	115	131	101	109	89	82	58
Not Reported	569	326	36	33	47	28	35	22	21	15	6
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
Can Hear & Understand Most Speech	809	397	60	72	65	61	56	44	38	10	6
Some Speech	183	80	24	15	11	20	10	13	8	1	1
None	13	8	0	1	2	1	1	0	0	0	0
Not Reported	105	51	7	13	10	5	6	4	8	1	0
40-59 dB	545	232	37	42	55	45	33	28	38	24	11
Can Hear & Understand Most Speech	103	30	5	11	13	10	5	11	8	5	5
Some Speech	278	123	23	21	34	21	17	9	21	8	1
None	69	31	3	5	4	5	4	2	7	5	3
Not Reported	95	48	6	5	4	9	7	6	2	6	2
60 dB & Over	2102	870	146	171	173	164	157	138	115	96	72
Can Hear & Understand Most Speech	47	19	1	6	4	4	8	1	3	1	0
Some Speech	501	238	33	30	42	31	41	30	24	18	14
None	1268	446	91	122	100	120	88	97	79	70	55
Not Reported	286	167	21	13	27	9	20	10	9	7	3

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[1] Based on a Subjective Judgment Made By the Student's Teacher.

[2] Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 9B. ABILITY TO HEAR & UNDERSTAND SPEECH[1] WITHOUT USE OF HEARING AID BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR. *

HEARING THRESHOLD LEVELS IN dB(ASA) & ABILITY TO HEAR & UNDERSTAND SPEECH WITHOUT USE OF HEARING AID [1]	RESIDENTIAL SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels[2]	2074	854	130	159	170	157	148	140	127	109	80
Can Hear & Understand Most Speech	75	26	3	8	8	6	7	2	9	3	3
Some Speech	505	243	27	26	44	30	37	33	32	17	16
None	1232	431	81	115	97	109	85	98	79	80	57
Not Reported	262	154	19	10	21	12	19	7	7	9	4
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
Can Hear & Understand Most Speech	6	2	0	0	0	1	0	0	2	0	1
Some Speech	9	5	0	0	0	1	1	2	0	0	0
None	1	0	0	0	1	0	0	0	0	0	0
Not Reported	4	2	0	1	0	1	0	0	0	0	0
40-59 dB	153	57	7	8	13	15	8	7	24	9	5
Can Hear & Understand Most Speech	27	8	1	2	3	2	1	1	5	2	2
Some Speech	80	34	4	5	8	9	3	3	13	1	0
None	33	9	1	1	1	3	2	2	6	5	3
Not Reported	13	6	1	0	1	1	2	1	0	1	0
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Can Hear & Understand Most Speech	33	9	1	6	4	3	6	1	2	1	0
Some Speech	368	170	22	19	36	18	31	26	18	14	14
None	1058	330	75	107	87	102	78	87	70	68	54
Not Reported	207	116	17	8	18	9	16	6	7	7	3

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[1] Based on a Subjective Judgment Made By the Student's Teacher.

[2] Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 10A. ABILITY TO HEAR & UNDERSTAND SPEECH WITH USE OF HEARING AID BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR*

HEARING THRESHOLD LEVELS IN dB(ASA) & ABILITY TO HEAR & UNDERSTAND SPEECH WITH USE OF HEARING AID	ALL TYPES OF SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels /1	4301	1964	311	347	348	322	294	253	225	143	94
Can Hear & Understand Most Speech	856	335	79	81	79	78	66	65	45	15	13
Some Speech	1103	546	61	63	72	65	76	65	59	51	45
None	521	256	45	64	50	47	16	14	14	12	3
Aid Not Used	1535	682	104	121	124	119	115	97	94	54	25
Not Reported	286	145	22	18	23	13	21	12	13	11	8
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
Can Hear & Understand Most Speech	243	97	25	26	22	26	14	18	12	0	3
Some Speech	38	22	4	4	2	1	1	3	1	0	0
None	4	2	0	1	1	0	0	0	0	0	0
Aid Not Used	739	372	56	64	53	57	53	36	34	11	3
Not Reported	86	43	6	6	10	3	5	4	7	1	1
40-59 dB	545	232	37	42	55	45	33	28	38	24	11
Can Hear & Understand Most Speech	292	115	26	27	28	29	16	19	19	8	5
Some Speech	138	76	6	5	10	7	11	3	9	8	3
None	6	3	0	2	0	0	0	1	0	0	0
Aid Not Used	85	27	3	7	14	8	6	4	8	7	1
Not Reported	24	11	2	1	3	1	0	1	2	1	2
60 dB & Over	2102	870	146	171	173	164	157	138	115	96	72
Can Hear & Understand Most Speech	272	95	25	24	28	21	32	24	12	7	4
Some Speech	818	372	48	47	54	53	62	56	47	39	40
None	449	199	43	59	47	46	14	13	14	11	3
Aid Not Used	454	150	22	34	38	39	37	41	41	31	21
Not Reported	109	54	8	7	6	5	12	4	1	8	4

/1 Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 10B. ABILITY TO HEAR & UNDERSTAND SPEECH WITH USE OF HEARING AID BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR*

HEARING THRESHOLD LEVELS IN dB(ASA) & ABILITY TO HEAR & UNDERSTAND SPEECH WITH USE OF HEARING AID	- RESIDENTIAL SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels /1	2074	854	130	159	170	157	148	140	127	109	80
Can Hear & Understand Most Speech	268	88	18	25	29	24	26	26	21	5	6
Some Speech	740	314	39	38	47	47	60	54	48	49	44
None	431	204	39	54	47	40	10	12	11	11	3
Aid Not Used	512	187	25	35	40	40	40	44	45	35	21
Not Reported	123	61	9	7	7	6	12	4	2	9	6
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
Can Hear & Understand Most Speech	11	4	0	1	0	3	1	1	1	0	0
Some Speech	4	3	0	0	0	0	0	1	0	0	0
None	1	0	0	0	1	0	0	0	0	0	0
Aid Not Used	1	1	0	0	0	0	0	0	0	0	0
Not Reported	3	1	0	0	0	0	0	0	1	0	1
40-59 dB	153	57	7	8	13	15	8	7	24	9	5
Can Hear & Understand Most Speech	65	20	4	7	7	7	3	4	10	1	2
Some Speech	62	29	2	0	3	5	5	2	8	6	2
None	5	3	0	1	0	0	0	1	0	0	0
Aid Not Used	13	2	0	0	2	2	0	0	6	1	0
Not Reported	8	3	1	0	1	1	0	0	0	1	1
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Can Hear & Understand Most Speech	171	51	14	16	21	12	21	19	9	4	4
Some Speech	609	240	35	34	40	40	54	48	39	39	40
None	380	163	37	52	45	39	9	11	11	10	3
Aid Not Used	419	131	22	31	35	36	36	39	38	30	21
Not Reported	87	40	7	7	4	5	11	3	0	7	3

/1 Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 11A. AMOUNT OF SPEECH THAT CAN BE UNDERSTOOD BY OTHERS [1] OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE; 1966-67 SCHOOL YEAR*

HEARING THRESHOLD LEVELS IN dB(ASA) & AMOUNT OF SPEECH UNDERSTOOD BY OTHERS [1]	ALL TYPES OF SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels [2]	4301	1964	311	347	348	322	294	253	143	143	94
Others Can Understand:											
Most of His Speech	2211	947	193	195	191	170	168	136	118	56	37
Some of His Speech	1077	495	67	82	88	68	74	59	62	50	32
None of His Speech	754	377	37	59	49	65	39	46	35	29	18
Not Reported	259	145	14	11	20	19	13	12	10	8	7
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
Others Can Understand:											
Most of His Speech	1006	468	86	93	79	82	71	59	49	12	7
Some of His Speech	70	49	4	4	4	3	1	2	3	0	0
None of His Speech	9	6	1	2	0	0	0	0	0	0	0
Not Reported	25	13	0	2	5	2	1	0	2	0	0
40-59 dB	545	232	37	42	55	45	33	28	38	24	11
Others Can Understand:											
Most of His Speech	400	153	31	36	43	34	26	22	26	19	10
Some of His Speech	103	60	3	4	9	7	6	3	9	2	0
None of His Speech	20	11	0	2	2	1	1	0	0	3	0
Not Reported	22	8	3	0	1	3	0	3	3	0	1
60 dB & Over:	2102	870	146	171	173	164	157	138	115	96	72
Others Can Understand:											
Most of His Speech	572	215	52	50	50	38	54	41	30	23	19
Some of His Speech	783	303	54	67	71	54	62	50	48	44	30
None of His Speech	605	272	33	48	44	62	32	40	34	22	18
Not Reported	142	80	7	6	8	10	9	7	3	7	5

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[1] Based on a Subjective Judgment Made By the Student's Teacher.

[2] Includes Persons For Whom Threshold Levels Were Not Reported.

* See Notes and Definitions, Page 28.

TABLE 11B. AMOUNT OF SPEECH THAT CAN BE UNDERSTOOD BY OTHERS[1] OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL , HEARING THRESHOLD LEVELS & AGE; 1966-67 SCHOOL YEAR*

HEARING THRESHOLD LEVELS IN dB(ASA) & AMOUNT OF SPEECH UNDERSTOOF BY OTHERS [1]	RESIDENTIAL SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels[1]	2074	854	130	159	170	157	148	140	127	109	80
Others Can Understand:											
Most of His Speech	570	215	46	47	46	36	48	42	42	24	24
Some of His Speech	755	293	45	59	71	51	57	50	50	48	31
None of His Speech	597	267	30	46	43	57	34	43	30	29	18
Not Reported	152	79	9	7	10	13	9	5	5	8	7
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
Others Can Understand:											
Most of His Speech	17	8	0	1	0	3	1	1	2	0	1
Some of His Speech	3	1	0	0	1	0	0	1	0	0	0
None of His Speech	0	0	0	0	0	0	0	0	0	0	0
Not Reported	0	0	0	0	0	0	0	0	0	0	0
40-59 dB	153	57	7	8	13	15	8	7	24	9	5
Others Can Understand:											
Most of His Speech	97	33	6	7	8	8	6	4	16	5	4
Some of His Speech	37	17	0	1	4	4	2	2	6	1	0
None of His Speech	8	4	0	0	0	1	0	0	0	3	0
Not Reported	1	3	1	0	1	2	0	1	2	0	1
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Others Can Understand:											
Most of His Speech	417	146	38	38	36	23	41	35	23	18	19
Some of His Speech	634	220	42	54	63	45	52	44	42	43	29
None of His Speech	508	207	29	42	40	54	30	37	29	22	18
Not Reported	107	52	6	6	6	10	8	4	3	7	5

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[1] Based on a Subjective Judgment Made By the Student's Teacher.

[2] Includes Persons For Whom Threshold Levels Were Not Reported.

* See Notes and Definitions, Page 28.

TABLE 12A. LIPREADING ABILITY[1] OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR *

LIPREADING ABILITY[1] & HEARING THRESHOLD LEVELS IN dB(ASA)	ALL TYPES OF SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels[2]	4301	1964	311	347	348	322	294	253	225	143	94
Good	1685	701	131	141	147	121	109	126	109	60	40
Fair	1769	791	129	159	138	144	141	82	85	60	40
None	577	325	34	31	45	42	32	30	16	13	9
Not Reported	270	147	17	16	18	15	12	15	15	10	5
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
Good	366	139	35	36	38	28	26	35	21	5	3
Fair	387	193	33	36	2[illegible]	35	28	13	18	2	3
None	197	118	15	16	14	15	10	3	5	1	0
Not Reported	160	86	8	13	10	9	9	10	10	4	1
40-59 dB	545	232	37	42	55	45	33	28	38	24	11
Good	297	106	23	22	32	27	21	18	26	14	8
Fair	204	99	12	18	16	18	11	7	11	9	3
None	34	23	2	1	5	0	1	1	1	0	0
Not Reported	10	4	0	1	2	0	0	2	0	1	0
60 dB & Over	2102	870	146	171	173	164	157	138	115	96	72
Good	823	346	58	71	65	54	49	63	50	39	28
Fair	990	384	72	89	89	82	91	54	55	42	32
None	243	113	13	10	18	25	15	21	8	11	9
Not Reported	46	27	3	1	1	3	2	0	2	4	3

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[1] Based on a subjective judgment made by the student's teacher.

[2] Includes persons for whom threshold levels were not reported.

*See Notes and Definitions, Page 28.

TABLE 12B. LIPREADING ABILITY /1 OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR *

LIPREADING ABILITY /1 & HEARING THRESHOLD LEVELS IN dB(ASA)	RESIDENTIAL SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels /2	2074	854	130	159	170	157	148	140	127	109	80
Good	816	353	48	63	61	48	43	63	61	43	33
Fair	957	349	65	87	86	85	88	57	57	49	34
None	251	129	13	8	18	21	15	20	7	11	9
Not Reported	50	23	4	1	5	3	2	0	2	6	4
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
Good	12	7	0	1	0	1	1	1	1	0	0
Fair	5	1	0	0	1	2	0	1	0	0	0
None	1	1	0	0	0	0	0	0	0	0	0
Not Reported	2	0	0	0	0	0	0	0	1	0	1
40-59 dB	153	57	7	8	13	15	8	7	24	9	5
Good	100	35	7	5	7	8	5	5	18	5	5
Fair	41	13	0	3	4	7	3	2	6	3	0
None	8	8	0	0	0	0	0	0	0	0	0
Not Reported	4	1	0	0	2	0	0	0	0	1	0
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Good	643	263	40	56	51	37	37	55	40	36	28
Fair	796	264	60	75	78	71	79	48	50	39	32
None	196	84	12	8	15	21	13	17	6	11	9
Not Reported	31	14	3	1	1	3	2	0	1	4	2

/1 Based on a Subjective Judgment Made By the Student's Teacher.

/2 Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 13A. READING ABILITY/1 OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR *

READING ABILITY/1 & HEARING THRESHOLD LEVELS IN dB(ASA)	ALL TYPES OF SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels/2	4301	1964	311	347	348	322	294	253	225	143	94
Good	1212	545	94	88	93	74	87	80	79	52	20
Fair	2307	913	186	223	211	207	168	138	123	74	64
None	413	317	11	15	13	15	12	13	6	7	4
Not Reported	369	189	20	21	31	26	27	22	17	10	6
Under 40 dB	1110	536	91	101	88	87	73	61	54	12	7
Good	334	142	29	24	36	22	27	27	21	5	1
Fair	569	277	51	59	40	49	31	26	25	6	5
None	51	42	4	3	0	2	0	0	0	0	0
Not Reported	156	775	7	15	12	14	15	8	8	1	1
40-59 dB	545	232	37	42	55	45	33	28	38	24	11
Good	164	69	13	13	10	13	9	8	17	9	3
Fair	285	99	21	24	34	31	20	16	20	12	8
None	54	43	2	4	3	1	1	0	0	0	0
Not Reported	42	21	1	1	8	0	3	4	1	3	0
60 dB & Over	2102	870	146	171	173	164	157	138	115	96	72
Good	570	260	40	41	37	34	39	34	36	34	15
Fair	1211	408	97	120	121	110	100	87	68	51	49
None	227	156	4	6	8	12	11	13	6	7	4
Not Reported	94	46	5	4	7	8	7	4	5	4	4

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[1] Based on a Subjective Judgment Made By the Student's Teacher.

[2] Includes Persons For Whom Threshold Levels Were Not Reported.

* See Notes and Definitions, Page 28.

TABLE 13B. READING ABILITY /1 OF HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL, HEARING THRESHOLD LEVELS & AGE: 1966-67 SCHOOL YEAR *

READING ABILITY /1 & HEARING THRESHOLD LEVELS IN dB(ASA)	RESIDENTIAL SCHOOLS - BOTH SEXES										
	AGE IN YEARS										
	All Ages	Under 11	11	12	13	14	15	16	17	18	19 & Over
All dB Levels /2	2074	854	130	159	170	157	148	140	127	109	80
Good	567	249	38	39	33	34	34	37	45	41	17
Fair	1189	395	82	113	123	109	95	91	72	55	54
None	217	159	4	4	7	8	11	9	4	7	4
Not Reported	101	51	6	3	7	6	8	3	6	6	5
Under 40 dB	20	9	0	1	1	3	1	2	2	0	1
Good	10	5	0	1	0	1	1	1	1	0	0
Fair	6	3	0	0	1	1	0	1	0	0	0
None	2	1	0	0	0	1	0	0	0	0	0
Not Reported	2	0	0	0	0	0	0	0	1	0	1
40-59 dB	153	57	7	8	13	15	8	7	24	9	5
Good	60	23	5	3	2	6	3	0	12	4	2
Fair	75	20	2	5	10	9	4	7	11	4	3
None	11	11	0	0	0	0	0	0	0	0	0
Not Reported	7	3	0	0	1	0	1	0	1	1	0
60 dB & Over	1666	625	115	140	145	132	131	120	97	90	71
Good	452	189	31	35	29	27	29	33	31	33	15
Fair	985	299	76	98	107	92	84	76	58	46	49
None	160	106	3	4	5	7	11	9	4	7	4
Not Reported	69	31	5	3	4	6	7	2	4	4	3

/1 Based on a Subjective Judgment Made By the Student's Teacher.

/2 Includes Persons For Whom Threshold Levels Were Not Reported.

*See Notes and Definitions, Page 28.

TABLE 14A: METHODS USED TO COMMUNICATE TO OTHERS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL AND HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR *

METHODS USED TO COMMUNICATE TO OTHERS	ALL TYPES OF SCHOOLS				
	HEARING THRESHOLD LEVELS IN dB(ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
TOTAL	4301	1110	545	2102	544
Speech Only	1890	1020	349	332	189
Speech & Other Means	995	11	94	789	101
Speech & Written Notes	200	7	11	180	2
Speech, Written Notes & Manual /1	795	4	83	609	99
No Speech	1223	16	71	927	209
Written Notes & Manual /1	463	0	5	383	75
Gestures /2	760	16	66	544	134
Not Reported	193	63	31	54	45

/1 Manual Alphabet and Language of Signs.

/2 Mostly Children Just Starting School.

*See Notes and Definitions, Page 28.

TABLE 14B. METHODS USED TO COMMUNICATE TO OTHERS BY HEARING IMPAIRED STUDENTS RECEIVING SPECIAL EDUCATION IN A FIVE-STATE AREA, BY TYPE OF SCHOOL AND HEARING THRESHOLD LEVELS: 1966-67 SCHOOL YEAR *

METHODS USED TO COMMUNICATE TO OTHERS	RESIDENTIAL SCHOOLS - BOTH SEXES				
	HEARING THRESHOLD LEVELS IN dB(ASA)				
	All dB Levels	Under 40 dB	40-59 dB	60 dB & Over	Unknown dB Level
TOTAL	2074	20	153	1666	235
Speech Only	244	10	43	182	9
Speech & Other Means	892	9	85	720	78
Speech & Written Notes	183	5	11	166	1
Speech, Written Notes & Manual /1	709	4	74	554	77
No Speech	894	1	22	735	136
Written Notes & Manual /1	413	0	4	348	61
Gestures /2	481	1	18	387	75
Not Reported	44	0	3	29	12

/1 Manual Alphabet and Language of Signs.

/2 Mostly Children Just Starting School.

*See Notes and Definitions, Page 28.

APPENDIX II

Tabular Summaries of Data From a National Survey of Identification Audiometry Programs and Educational Services for the Hearing Impaired.

The tables that follow contain summaries of the descriptive information received from each state. A separate publication now in preparation will contain a more detailed description of these programs.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Alabama	Hearing clinics held in 4 cities for children referred by physicians. No other areas have regularly scheduled programs.	Clinics open to any child between the ages of one week & 21 years.	Not available.
Alaska	Not reported.	Recommended that all children K to grade 3 be tested annually, every 3 years beyond grade 3.	Not available.
Arizona	State divided into 3 districts & recruitment started to place audiometrist in each district.	Recommended that all children in K, grades 1, 3, 5, 7, 9, 11, plus new students, teacher or parent referrals & known cases be tested.	1966-67 school year - About 75,000 children tested.
Arkansas	Entire state covered.	Some schools test all children every other year, some alternate grades, some do grades 1, 2, 5, 7, plus any suspected hearing problems from all other grades.	1965-66 school year - 61 of 75 counties, all cities reported, 77,545 screened, 2,180 referred. 46 of 75 counties, 829 followed up.
California	Most of state covered.	If every child cannot be tested every year, all children in as many grades as possible with priority to K, grades 2, 3 & all referred children are tested.	1963-64 school year - 714 out of 1624 forms returned. 982,802 screened. (23.2% of enrollment.) 26% were tested by mobile units.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Colorado	Report	Not Received.	
Connecticut	Entire state covered.	Children in grades 1, 3, 6, 10 are screened; many schools are beginning to screen all children K, grades 1, 2, 3.	Not available.
Delaware	Entire state covered.	Children in K, grades 1, 3, 5, 8, 11, special education classes & new children.	1966-67 school year - 54,375 given pure tone audiometric test. 229 referred to school nurses by speech & hearing therapists for audiological/otologic examination. 2821 failed screening test given by school nurse. 2128 given threshold test by school nurse. 1101 referred by nurses for audiological/otologic examination. 51 schools have special sound treated audiometric testing rooms; 123 audiometers owned by public schools.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
District of Columbia	Entire city covered.	Junior primary, grades 1, 3, 7, 9 (parochial only), 10, all new children, & referrals.	No records are available. Statistical summary will be available for 1967-68 school year.
Florida	No statewide program. 8 of 67 county school systems offer identification audiometry under auspices of Exceptional Child Education.	Testing varies within 8 reported counties. 2 counties test all children. Of other 6 counties: one tests grade 1 only; one tests grade 1 & referrals; one tests grades 1, 6 & referrals; one tests grades 1, 3, 7; one tests grades 2, 5, 7; one tests grade 1, special education students & students in basic classes in grades 2, 3, 4, 5, 6.	Available for only one county (Bay). 1967-68 school year: 1,438 tested.
Georgia	Entire state not covered but there is some testing in a majority of counties. 108 of 159 counties reported number of children screened.	Grades tested vary. Emphasis places on testing grade 1 & teacher referrals. State recommendation is that all children should be tested at least 4 times while in school.	1966-67 school year - 108 counties reported. 147,396 screened. 7,267 failed screening 4,001 seen by physician.
Hawaii	Entire state covered.	K, grade 2, teacher referrals, new children & old known cases.	1966-67 school year - 38,550 screened. 2-5% of newly screened were referred to otologic clinic or to private doctor.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE : JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Idaho	No organized statewide identification audiometry program. Some testing is done in a few areas of the state.		1965 - 20,000 tested by Easter Seal Society.
Illinois	No organized statewide identification audiometry program. Testing is done in many parts of the state, but no data received from local areas.		
Indiana	Entire state covered.	Grades 1, 4, 7, 10, plus new students & all those suspected of having hearing defects.	Not available.
Iowa	Entire state covered with exception of a few counties.	Each demographic area screens different grades. 38 of more than 90 areas screened grades 1, 3, 6, 9, in 1966-67 school year.	1966-67 school year - 239,677 screened. 26,659 received threshold test after failing screening. 16,285 received threshold test as a result of referrals, rechecks or reasons other than screening. 8,546 referred for medical consultation. 1,147 identified as needing regularly scheduled direct special educational services. 4,394 identified as needing indirect, periodic, consultative, or other type of service.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Kansas	Entire state will be covered by 1969.	Grades 1, 3, 5, 7, 10 & all new children.	Not reported.
Kentucky	Entire state covered.	Grades 1, 3, 5.	1966-67 school year - 30,300 screened out of a total school population of 80,000. 5,000-8,000 were referred.
Louisiana	Entire state covered.	Grades 1, 4, 8, 11.	1966-67 school year - 48,993 screened. 7,130 given threshold tests. 1,485 referred for medical examination. 1,008 received otologic examination.
Maine	Testing is widespread throughout state; controlled at local level.	There are 22 speech correctionists subsidized by State Department of Education who provide screening tests to all students referred. There are 6 speech & hearing clinics serving school children.	Not reported.
Maryland	No organized statewide program. Testing done in many parts of state.	State Department of Health recommends annual testing of all kindergarten & school-age children & all new children. There is some testing variation among counties. Generally, school-age children are screened every other year.	Not reported.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Massachusetts	Entire state covered.	All grades.	1965-66 school year - 982,674 screened. 29,480 failed. 27,769 accepted as correct referrals by an ea specialist or general practitioner.
Michigan	Entire state covered.	All grades every other year plus classes for mentally handicapped plus pre-school program.	1965-66 school year - 745,487 screened. 26,075 failed. 12,270 referred to otologist or otolaryngologist.
Minnesota	State Department of Health assisted in screening at least portions of 57 out of 87 counties during 1966-67 school year. Possible that school systems within most counties have some program.	Children in K, grades 1, 2, 3, 5, 7, 9, 11; children with known hearing problems; new students & parent & teacher referrals. Pre-schools are also tested whenever possible.	Not available for programs other than State Department of Health programs. Sept. '67 to Jan. '68 - 103,914 screened. 1,132 4-year-olds screened.
Mississippi	No organized statewide identification audiometry program. Some hearing testing is done through county health departments, volunteer groups, speech clinicians employed by local public schools & university audiometry screening teams.		

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Missouri	Some areas of state conduct separate hearing screening programs. Other areas are serviced by cooperative programs of state agencies.	Not reported.	Not reported.
Montana	No organized statewide identification audiometry program.		
Nebraska	No organized statewide identification audiometry program. Some programs conducted at local level, but no specific data received.		
Nevada	Report Not Received		
New Hampshire	No organized statewide identification audiometry program. At local level, supervisory union sets up hearing testing schedule.		
New Jersey	Not reported.	Children in K, grades 1, 2, 3, 4, 5, 6, 7, 9, 11; teacher referrals, new pupils, & those recovering from tonsillectomies or communicable diseases.	Not reported.
New Mexico	Entire state covered.	Children in grades 1, 3, 6, 9.	Unknown.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Area or Ages Covered Annually	Year & Number of Children Screened
New York	Entire state covered.	All children tested annually with priorities to children in K, grades 1 & 3, new pupils, pupils with known hearing impairment, pupils exhibiting symptoms of emotional or learning disability, pupils having speech difficulties, pupils recently recovered from any illness with possible significance for hearing health, pupils suspected of having hearing problems referred by teachers, parents or physicians.	Not reported.
North Carolina	Beginning an organized statewide identification audiometry program through Speech & Hearing Special Education Section, Department of Public Instruction.	Number of grades tested is determined at local level. Suggested that all children in grades 1, 3, 5, 7, 9, or in grades 2, 4, 6, 8 & any of high school grades be tested.	1966-67 school year - Approximately 176,028 children tested.
North Dakota	Although there is no organized statewide identification audiometry program, screening programs are quite extensive throughout the state.	Programs vary but most areas provide 4 tests through 12 grades.	1966-67 school year - Approximately 40,000 out of 167,000 children tested.
Ohio	Entire state covered.	Recommended that children in K, or grade 1 & grades 3, 6 & 9 be tested. Actual gradss screened depends on local resources.	1965-66 school year - 377,268 screened. 9,262 referred. (2.45%)

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Oklahoma	96% of total school population of state covered by organized programs.	At least K, grades 1, 3 & 5 plus other grades, referrals & new transfer pupils. Other grades when able.	1966-67 school year: Health departments - 96,414 screened, 2,200 referred(2.3%). City schools - 96,573 screened, 1,742 referred(1.8%).
Oregon	Entire state covered.	Children in K, grades 1, 3, 5, 7, & 9 & children with known losses. New enrollees, high school students & other special cases may be tested through teacher-nurse referrals.	1965-66 school year - 168,551 elementary school children screened. 7,855 referred for audiological examination (4.7%). 4,192 referred for medical examination(2.3%). 4,460 children(elementary, high school, & preschool) referred by teacher or nurse for testing. 867 referred for audiological examination (19.4%). 487 referred for medical examination(10.9%). 717 rechecks(elementary) tested. 318 referred for audiological examination (44.4%). 89 referred for medical examination(12.4%).

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Pennsylvania	Entire state covered.	Children in K, grades 1, 2, 3, 7 & 11, & special ungraded classes, children with known or suspected hearing loss & new enrollees.	1965-66 school year 1,483,595 screened. 83,031 failed. 40,170 referred. 26,039 seen by physician
Rhode Island	33 of 39 school departments. 5 pre-schools.	K, grades 1, 4, 7, 10 & special.	1966-67 school year - 19,000 screened.
South Carolina	No organized statewide identification audiometry programs. Many school districts have their own hearing conservation programs, some on a countywide basis.	Most commonly, grades 2 & 6 & teacher referrals.	1966-67 school year - 2806 tested.
South Dakota	Some schools conduct hearing screening programs. A speech & hearing mobile unit travels throughout state.	Programs vary.	1966-67 school year- 19,523 tested for hearing & speech by mobile unit.
Tennessee	Entire state covered.	Grades 2, 4, 6, transferees, & special referrals.	1966-67 school year - 23,218 tested.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Years & Number of Children Screened
Texas	All School districts in 19 counties & approximately 625 other school districts.	Some districts screen all children annually; some screen all children every other year. Some screen grades 1, 3, 5, 7 & 12.	1965-66 school year- 761 out of 1330 school districts(254 counties) reported programs. 870 audiometers in state 128 speech therapists doing testing. 1061 school nurses doing testing. 47 lay people doing testing. 734,463 children screened. 18,969 children referred. 7,624 children consulting a physician. 7,430 children receiving remedial attention.
Utah	Eleven school districts.	No organized statewide identification audiometry program.	Not reported.
Vermont	Entire state covered.	Children in grades 1, 2, 3, 5, 7 & 9 plus any suspected of having hearing problems.	Approximately one fifth of school enrollment.
Virginia	Entire state covered. Some areas do not use pure-tone audiometric testing.	Children in all grades.	1966-67 school year- 89,501 tested. 4,564 had hearing defects. 2,345 had a medical follow-up.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section A - Coverage

State	Area of State Covered	Grade or Ages Covered Annually	Year & Number of Children Screened
Washington	No organized statewide identification audiometry program.	Usually, children in K through 10 are screened at least once every 3 years. All new children are screened.	Not reported
West Virginia	No organized statewide identification audiometry program. No counties have regular program.	Some areas screen grades 3, 5, 7 & 9; some screen grades 1, 3, 7, 9 & referrals. Frequency of occurrence of testing varies.	Not available.
Wisconsin	Report	Not Received.	
Wyoming	165 school districts serving 83,355 children (97.25% of pre-school enrollment).	Most school districts screen odd number or even number grades.	1965-66 school year - 83,355 screened.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Alabama	No regular screening program - clinic tests are given according to need as determined by the audiologist.		Only certified audiologists are used in clinic programs.
Alaska	500, 1000, 2000, 3000, 4000, 6000.	25 dB(ISO) - all frequencies. 10 dB(ASA) - all frequencies except 4000; 20 dB(ASA) - 4000.	Volunteers who may be instructional aides, Headstart teachers, or interested persons.
Arizona	At least 500, 1000, 2000, 4000.	15 dB(ASA) or 25 dB(ISO) at one or more frequencies.	Volunteers; may be trained by nurses, audiometrists, or State Hearing Consultant.
Arkansas	500, 1000, 2000, 4000, 6000.	30 dB(ISO) in one or more frequencies in either ear.	Volunteers trained by qualified Hearing Consultant.
California	At least 500, 1000, 2000, 4000.	15 db(ASA) at any one frequency.	Certified personnel: (1)school nurses (2)teachers of lipreading (3)school audiometrists. Specific criteria set forth for certification by State Legislature.

TABLE I - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Colorado	Report	Not Received	
Connecticut	500, 1000, 2000, 4000, 6000.	10-15 dB(ASA) & 20-25 dB(ISO) for one or more frequencies.	Trained technicians, speech & hearing clinicians, or school nurses trained to conduct tests.
Delaware	250, 500, 1000, 2000, 4000, 8000.	25 dB(ISO) at one frequency in one ear in speech range (500, 1000, 2000) or 25 dB(ISO) at 2 frequencies in one ear outside speech range (250, 4000, 8000) or 15 dB(ASA) at one frequency in one ear in speech range or 15 dB (ASA) at 2 frequencies outside speech range.	School nurses. Qualifications for screening testing involve either evidence of successful completion of a course in audiometric testing given at University of Delaware or participation in an in-service training program given by State Department of Public Instruction.
District of Columbia	1000, 2000, 4000, 6000.	Greater than 15 dB(ASA) at 1000 or 2000, &/or greater than 30 dB(ASA) at 4000 and 6000.	Hearing technicians having a Bachelor's Degree working under training & supervision of Audiology Clinic, & graduate students.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Florida	No organized statewide program. 4 of 8 reported county school districts test at 500, 1000, 2000, 4000.	No organized statewide program. Levels vary among county school districts.	No organized statewide program. In 5 of 8 reported county school districts, speech/hearing clinicians perform screening.
Georgia	125, 250, 500, 1000, 2000, 4000, 6000, 8000 (optional).	30 or 35 dB(ISO) at any 2 frequencies in same ear or 40 dB or more at any one frequency.	Volunteers trained by technicians & who are under supervision of local public health nurse.
Hawaii	500, 1000, 4000, 6000.	30 dB(ISO) at any 2 frequencies.	Speech & hearing therapists.
Idaho	No organized statewide identification audiometry program. No information is available for the few areas where testing is done.		
Illinois	No data received from areas that conduct programs.		
Indiana	No organized statewide identification audiometry program. Procedures vary among school corporations.		

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Iowa	Sweepcheck: Individual screening. 500, 1000, 2000, 3000, 4000, 6000. Group screening-Johnston method. (250)*, 500, 1000, 2000, 3000, 4000, 6000. *Used as indicator frequency for ambient noise conditions in screening environment.	15 dB(ASA) at any frequency in either ear. ISO equivalents are allowed, but an average ISO screening level is not encouraged.	State certified speech or hearing clinicians conduct screening. Criteria for certification include: (1)Master's degree or equivalent from state approved agency; (2)training institution attests to competency & completion of program of courses concerned with speech, hearing & language.
Kansas	250, 500, 1000, 2000, 4000.	25-30 dB(ISO) at 2 or more frequencies & 40 dB(ISO) at one or more frequencies.	Audiologists, speech & hearing clinicians, trained technicians, or school nurses who are trained to conduct these tests.
Kentucky	250, 500, 1000, 2000, 4000, 8000.	15-20 dB(ASA) at 2 or more frequencies & 30 dB(ASA) at one or more frequencies.	Volunteers. If local school district has a speech & hearing program, speech correctionist may train volunteers.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Louisiana	500, 4000.	25 dB(ISO) at any frequency.	Program varies among school systems. Testing is conducted by: (1) volunteers who are trained & assisted by speech therapists; (2) speech therapists, volunteers, nurses from State Department of Health, audiologist from State Department of Health, or (3) volunteers trained by audiologist from State Department of Health.
Maine	Locally controlled programs. -	data not available.	
Maryland	500, 1000, 2000, 4000.	25 dB(ISO) at any frequency.	Trained public health nurses, school nurses, hearing screening technicians, volunteers. It is recommended by State Department of Health & State Department of Education that all screeners attend workshops conducted by State Department of Health.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Massachusetts	250, 500, 1000, 2000, 3000, 4000, 6000 (ASA). 500, 1000, 1500, 2000, 3000, 4000, 6000 (ISO).	15 dB(ASA). 25 dB(ISO).	Persons conducting testing must be approved by state.
Michigan	250-4000.	Failure at any frequency in either ear is a basis for retesting.	State approved persons.
Minnesota	250, 500, 1000, 2000, 4000, 6000.	2 or more tones in either ear; testing level - 25 dB(ISO) for frequencies 1000, 2000, 4000, 8000 & 30 dB(ISO) for frequencies 250 & 500.	If school uses State Department of Health program, volunteers are trained to administer tests under supervision of technician from State Department of Health. Technicians are supervised by consultants who have Bachelor's degree or Master's degree & experience in speech &/or hearing disorders. In independent programs, nurses, speech therapists, or health instructors usually conduct screening. There are no requirements or qualifications.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Mississippi	No organized statewide identification audiometry program.		
Missouri	Following information is in regard to areas of state serviced by state cooperative programs: 500, 1000, 2000, 4000, 6000, 8000.	20 dB(ASA) or 30 dB(ISO) at one frequency or more in one or both ears.	Public health nurses or volunteers conduct screening. There are no enumerated qualifications for volunteers.
Montana	No organized statewide identification audiometry program.		
Nebraska	No organized statewide identification audiometry program.		Screening is generally carried out by a public health or school nurse, speech & hearing clinicial, audiologist or teacher. These testers may use the services of the Hearing Consultant for the State Departments of Health & Education for testing procedures & follow-up.
Nevada	Report Not Received.		

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
New Hampshire	No organized statewide identification audiometry program. Program controlled at local level.		School nurses.
New Jersey	125, 250, 500, 1000, 2000, 4000, 8000.	15 dB at any one frequency in one or both ears.	School nurses.
New Mexico	250, 500, 1000, 2000, 4000, 8000.	20 dB(ASA) at 2 frequencies in one ear or 30 dB(ISO) at 2 frequencies in one ear.	School nurses, public health nurses, or volunteers. Consultant from State Health & Social Services Department trains persons. There are no qualifications.
New York	250, 500, 1000, 2000, 3000, 4000, 6000.	25 dB(ISO) at 2 or more frequencies in either or both ears, one of missed frequencies in speech area(500, 1000, 2000, 3000) & other frequency outside speech area.	Certified school nurse-teacher.
North Carolina	Beginning an organized statewide identification audiometry program. Suggested that a sweep test of recommended frequencies (500, 1000, 2000, 3000, 4000) be given.	15-20 dB(ASA) at 2 or more frequencies.	Speech & hearing therapists, public health nurses, or school nurses. State Department of Public Instruction will hold a hearing conservation workshop when requested by city or county unit.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
North Dakota	Programs vary. Usually 500, 1000, 2000, 4000, 8000 are used.	30 dB(ISO) at 2 or more frequencies.	Public health nurses or speech clinicians usually conduct tests.
Ohio	250, 500, 1000, 2000, 4000, 8000.	30 dB(ISO) at 250 & 500 25 dB(ISO) at all other frequencies.	Testers are trained by staff members of State Department of Health. Testers are selected locally. No educational level is required.
Oklahoma	500, 1000, 2000, 4000, 6000.	25 dB(ISO) at 2 or more frequencies.	Trained volunteers & nurses. State Department of Health provides in-service training to public health & school nurses on conducting hearing conservation programs.
Oregon	1000, 2000, 4000, 6000 - Johnston Group Test.	20 dB(ISO) at one frequency in either ear.	Audiometrist's graduation from a 4-year college is basic educational requirement. Training is provided by State Department Board of Health.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B- Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Pennsylvania	350, 500, 100, 2000, 4000.	25 dB(ISO) at 2 or more frequencies in one or both ears.	School nurses, designated medical technicians &/or speech & hearing personnel.
Rhode Island	250, 500, 1000, 2000, 4000, 6000, 8000.	20 dB(ISO) at 500-2000, 8000. 25 dB(ISO) at 4000, 6000.	Audiometric technicians
South Carolina	No organized statewide identification audiometry program. If audiometric test is used - 1000, 2000, 4000, 8000.	20 dB(ASA) at 2 frequencies.	In many areas school nurses do screening & in other areas speech clinicians. Several areas have volunteer teams who after receiving instruction from a clinician conduct screening.
South Dakota	Mobile unit project: 1000, 2000, 4000, 6000.	Any one of following levels in either ear - 20 dB(ISO) at 1000, 2000. 30 dB(ISO) at 4000. 25 dB(ISO) at 6000.	Audiometric technicians having at least a B.A. in speech & hearing.
	School nurses & speech clinicians: 1000, 2000, 3000, 4000 & sometimes 6000.	25 dB(ISO) at any one frequency.	School nurses & speech clinicians.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Tennessee	250, 500, 1000, 2000, 4000, 8000.	27 dB(ISO) at 500, 1000, 2000.	Speech & hearing therapists having Bachelor's or Master's Degree with certification in speech & hearing, & audiometric technicians having a high school education course work in audiometric testing (work under supervision of regional supervisor of Public Health Department). School health nurses aid in routine screening.
Texas	500, 1000, 2000, 4000, for ISO calibration. 250, 500, 1000, 2000, 4000 for ASA calibration.	25-30 dB(ISO) or 15-20 dB(ASA) in 2 or more frequencies in one ear.	Speech therapists, school nurses & volunteers conduct testing. No specific requirements. State Department of Health furnishes training to schools that request it.
Utah	No organized statewide identification audiometry program. Each district uses its own screening levels.		
Vermont	125 to 8000.	15 dB(ASA).	Trained volunteers.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section B - Initial Screening Procedures

State	Frequencies Used	Failure Levels	Tests Conducted By
Virginia	500, 1000, 2000, 4000.	25 dB (ISO). 20 dB(ASA) at any 2 frequencies or 30 dB(ASA) at any one frequency.	Graduate speech therapists, visiting teachers, graduate hearing therapists, & trained volunteer groups.
Washington	No organized statewide identification audiometry program. 250, 8000.		Public health nurses or speech therapists do testing. Trained technicians or school nurses are trained.
West Virginia	No organized statewide audiometry program. Usually 1000, 2000, 4000, 6000 when audiometric testing is used.	Usually 20 dB at 2 or more frequencies.	No qualifications or training requirements.
Wisconsin	Report Not Received.		
Wyoming	500, 1000, 2000, 4000, 6000.	20 dB(ASA).	School nurses, speech therapists, county superintendents, teachers, principals, office help, conduct tests. Minimal instruction is given to those conducting tests. Each district can obtain assistance from State Department of Education.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Alabama	No regular follow-up testing. Services including additional testing are provided as necessary by clinical audiologists.			Clinic required to notify Crippled Children's Service when further treatment &/or special educational aids or training is indicated.
Alaska	Threshold test.	Not reported.	Public nurses, speech or hearing therapists or well-trained & experienced volunteers.	Recommendations for otologic examinations, audiological evaluations, hearing aid evaluations & fittings, & educational follow-up.
Arizona	Rescreen. Threshold test.	15 dB(ASA) or 25 dB(ISO) at one or more frequencies.	Nurses who have received training, audiometrists, hearing consultants, Speech & hearing therapists, or in speech & hearing clinics at universities or hospitals.	Medical referral. Referrals for special educational aids or services.
Arkansas	Threshold test.	30 dB(ISO) at one or more frequencies in either ear.	School nurse, public health nurse or Hearing Consultant.	Referral by letter to parent--to family physician for further examination & referral to otologist if indicated.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further testing	Failure Levels	Tests Conducted By	Type of Referrals
California	2 threshold tests 2 months apart.	Not reported.	Certified personnel.	Notification & consultation with parents. Medical referral. Observation & retesting of children whose test results appeared invalid, or whose suspected loss was insufficient to meet criteria for medical referral.
Colorado		Report Not	Received.	
Connecticut	Threshold test.	10-15 dB(ASA) & 20-25 dB (ISO) for one or more frequencies.	Trained technicians, speech & hearing clinicians, or school nurses trained to conduct tests.	Further audiological testing & otologic examination. Child's family is responsible for audiological & otologic examinations. Form is generally returned to school. If audiological examination is required, school nurse or appropriate school personnel with permission of parent or guardian may arrange for examination.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Delaware	Threshold test.	25 dB(ISO) or more at one frequency in one ear in speech range (500, 1000, 2000) or 25 dB(ISO) or more at 2 frequencies in one ear outside speech range (250, 4000, 8000) or 15 dB(ASA) or more at one frequency in one ear in speech range or 15 dB (ASA) or more at 2 frequencies in one ear outside speech range.	School nurses & speech & hearing clinicians.	Parents are informed & encourages to obtain audiological/otologic examination through STate Board of Health clinic program or through private physicians. Special education placement recommended by State Department of Public Instruction.
District of Columbia	Threshold tests (air & bone) & speech tests.	Not reported.	Hearing technicians having Bachelor's degree working under supervision & training of audiology clinic & graduate students.	Clinic failures & children with positive otologic history are referred to onsite ENT clinic for examination, diagnosis & minor treatment. Referrals to schools made by audiology clinic staff.
Florida	No statewide program. 6 of 8 reported county school districts give threshold test after second screening; 2 districts give threshold test after initial screening.	No statewide program. Levels vary among county school districts.	No statewide program. In 4 of 8 reported county school districts, speech & hearing clinicians perform threshold tests.	No statewide program. All 8 reported county school districts refer threshold failures for medical/audiological examination. 4 of these counties request a copy of the physician's report be returned.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Georgia	Rescreen. Threshold test.	30 or 35 dB(ISO) at any 2 frequencies in same ear or 40 dB(ISO) or more at any one frequency.	Public health nurse or audiometrist.	Otologic follow-up screening clinics. Board certified otologists screen threshold test failures & make recommendations for medical, audiological, psychological &/or other treatment procedures.
Hawaii	Threshold test within 2 weeks of initial screening.	Greater than 30 dB(ISO) at 2 or more frequencies in one or both ears at 500, 1000, 2000, 4000, 6000.	Speech & hearing therapists.	Referred to Department of Health Otologic Clinic or family physician. If, after medical treatment, hearing is still deficient, referral is made for special educational placement.
Idaho	No organized statewide identification audiometry program. No information available for the few areas where testing is done.			
Illinois	No data received from areas that conduct programs.			
Indiana	No organized statewide program. Procedures for hearing testing & criteria for referral vary among school corporations.			
Iowa	Threshold test.	20 dB(ASA) at 2 or more frequencies in either ear ISO equivalent allowed.	Speech or hearing clinicians.	Audiological & otologic.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Kansas	Threshold test for: screening failures; children who have a history of ear &/or upper respiratory infection; & teacher or speech & hearing clinician referrals.	25-30 dB(ISO) at 2 or more frequencies & 40 dB (ISO) at one or more frequencies.	Audiologists, speech & hearing clinicians, trained technicians or school nurses who are trained to conduct these tests.	Further audiological testing & otologic examination. Child's family is responsible for arranging otologic examination by a physician. Form is returned to school.
Kentucky	Threshold test for: screening failures; children who have a history of ear &/or upper respiratory infection; & teacher or speech & hearing therapist referrals.	Not reported.	Audiologists.	Further audiological testing & otologic examination at one of 3 regional speech & hearing centers.
Louisiana	Threshold test.	Not reported.	Program varies among school systems. Testing is conducted by: (1)speech therapists (2)nurses & speech therapists, or (3)nurses.	Person supervising program requests State Department of Health to send otologist to see referrals.
Maine	Locally controlled programs - data not available.			

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TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Maryland	Rescreen. Threshold test.	25 dB(ISO) at 2 or more frequencies & 40 dB(ISO) at one or more frequencies.	State Department of Health speech & hearing consultants, public health & school nurses, or trained technicians.	Initial referral to family physician. Audiological & otologic referral in consultation with family physician. Form is returned to health department &/or school. If no family physician, family may be referred to Crippled Children's Hearing Clinic.
Massachusetts	Threshold test.	20 dB(ASA) at 2 or more frequencies in same ear or 30 dB(ASA) at any one frequency. 30 dB(ISO) at 2 frequencies in same ear or 40 dB (ISO) at one frequency.	Persons conducting tests must be approved by State.	Notice to parents for referral to otologist. Copy of report is returned to school.
Michigan	Preliminary threshold.	Not reported.	Persons conducting tests must be approved by State Department of Health.	Notice to parents for otologic clinic. Copy of report returned to school.
Minnesota	Rescreen in 2 weeks. Threshold test.	25 dB(ISO) at 2 or more frequencies in speech range (1000, 2000, 4000, 8000) or 30 dB(ISO) or more in 2 consecutive frequencies outside of speech range (250, 500).	Not reported.	Referred to family physician who decides whether or not child is referred for further audiological or otologic examination. Report from physician or clinic is requested but not required.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Mississippi	No organized statewide identification audiometry program.			
Missouri	Following information is in regard to areas of State serviced by Rescreening. Threshold test.	Rescreening - 15 dB(ASA) or 25 dB(ISO) at 2 or more frequencies in one or both ears. Threshold test- 30 dB (ASA) or 40 dB(ISO) at 2 frequencies in one or both ears.	Rescreening & threshold test are conducted by public health nurses.	State cooperative programs: Referral to family for physician's report or ear & hearing examination. Physician is asked to return form to school or nurse. Public health nurse has responsibility for follow-up of children referred. Recommendation regarding educational placement made by specialists involved in diagnosis.
Montana	No organized statewide identification audiometry program.			
Nebraska	No organized statewide identification audiometry program. Data not available about local programs.			
Nevada	Report Not Received.			
New Hampshire	No organized statewide identification audiometry program. Program controlled at local level.			Children with losses of 20 dB(ASA) or 30 dB(ISO) or more referred to otologist.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-UP Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
New Jersey	Rescreen. Threshold test.	20 dB in one or both ears at any 2 frequencies.	Not reported.	Parents advised to contact family physician for further examination. Proper school authority notified.
New Mexico	Threshold test. More than one threshold test is made before referral.	20 dB(ASA) at 2 frequencies in one ear or 30 dB (ISO) at 2 frequencies in one ear.	Nurses conduct threshold test.	Referral to otologist. Care through Crippled Children's Services for medically indigent.
New York	Threshold test.	25 dB or more(ISO) in either or both ears.	Certified school nurse-teacher conducts test.	Parents advised to take child for otologic examination.
North Carolina	Threshold test.	25 dB or more(ISO) in either or both ears.	Tests are conducted by speech & hearing therapists, public health nurses or school nurses.	Parents are responsible for further audiological testing & otologic examination. Parents are advised by proper school authority.
North Dakota	Threshold test.	Not reported.	Tests are conducted by public health nurses or speech clinicians.	Referred for medical attention to family physicians.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Ohio	Threshold test.	25-30 dB(ISO) at any frequency or any one frequency at 500-2000, or 50 dB(ISO) at any one frequency & consideration of case history.	Tests conducted by public health nurses, school nurses, & speech & hearing therapists.	Referral either to family physician or to a pediatric otological diagnostic center. Referral for special education to State Department of Education, Division of Special Education, made by local school administrator.
Oklahoma	Threshold test.	25 dB(ISO) at 2 or more frequencies in other ear or 35 dB(ISO) at one frequency.in either ear.	Public health nurse, Speech pathologists.	Medical referral made to family physician with cooperative follow-through, when necessary, on referrals for further attention.
Oregon	Threshold test.	Average loss of 20dB(ISO) in either ear for frequencies 500, 1000 & 2000 &/or average of 25 dB(ISO) in either ear for frequencies 3000, 4000 & 6000.	Audiometrists.	Audiometric referral. Medical screening at otological diagnostic clinic.
Pennsylvania	Threshold test.	30 dB(ISO) or more at 2 or more frequencies in one or both ears, or 35 dB(ISO) or more at one frequency in either ear.	School nurses, designated medical technicians, &/or speech & hearing personnel.	After clearance with family physician, referral is made to otologist &/or one of the audiology centers participating with program.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Rhode Island	Threshold test.	Not reported.	Audiologist.	Otologist for further examination. School nurse responsible for follow-up.
South Carolina	Threshold test.	Not reported.	Hearing consultant from State Department of Education, hearing & speech clinician, or nurses trained in audiometric testing.	Referral to otologist for further examination. It is school administrator's responsibility to follow-up. Otologist is to complete form.
South Dakota	Mobile unit project: Threshold test. Threshold diagnosis.	Not reported.	Audiometric technicians having at least a B.A. in speech & hearing. Audiologist having an M.A.	Parents' responsibility to obtain medical attention for child.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Tennessee	Threshold test.	Not reported.	Speech & hearing therapists having Bachelor's or Master's degree with certification in speech & hearing, & audiometric technicians having a high school education & course work in audiometric testing (work under supervision of regional supervisor of Public Health Department).	If audiogram indicates child has loss or if child has history of earaches or draining ears, parents are notified through local health department or by speech & hearing therapist. Doctor's or clinical report is required. Health department, parents, teachers, medical profession, speech & hearing centers, or any interested person may refer child for special educational services. Local school system determines if special educational aids or servicss are needed.
Texas	Threshold test.	25 or 30 dB at 2 or more frequencies (500, 1000, 2000, 4000) in the same ear.	Speech therapists, lay people, and nurses.	Referral to family physician. Parents are responsible for medical examination. Family physician may refer child for further testing & otologic examination.
Utah	No organized statewide identification audiometry program. Each district uses its own referral criteria.			

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Vermont	Threshold test.	Not reported.	Registered nurse.	Referrals & follow-ups are responsibility of local school districts.
Virginia	Threshold test.	25 dB(ISO). 20 dB(ASA) at 2 frequencies or 30 dB(ASA) at one frequency.	School nurse.	Medical referral. A doctor or clinic report is required.
Washington	No organized statewide identification audiometry program. Threshold test.			Further audiological testing or otologic examinations. Family is responsible for arranging for otologic examination.
West Virginia	No organized statewide identification audiometry program.			Parents & family physician are notified & it is suggested that child be reexamined.
Wisconsin	Report	Not Received.		

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section C - Follow-Up Procedures

State	Type of Further Testing	Failure Levels	Tests Conducted By	Type of Referrals
Wyoming	Threshold test.	20 dB(ASA) or more for all frequencies above 250 or 35 dB(ASA) for all frequencies above 2000.	Audiometric specialists at residential school &/or otologist, school nurses, or at certified speech and hearing clinics	Referral to State Department of Education, Division of Special Services. Arrangements are made for State Consultant to come to school for purpose of further testing & consultation with child, parents & school personnel. Referral then made to medical personnel or to certified speech & hearing clinic. In cases of high tone & unilateral losses rechecks are encouraged as well as medical examination.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAM BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Alabama	No state law requiring hearing testing.	State Crippled Children's Service, part of the Division of Vocational Rehabilitation & Crippled Children's Service, State Department of Education.	Individual records on all persons served in clinic program. Contains otologic & audiological information.	State Crippled Children's Service.
Alaska	No state law requiring hearing testing.	Speech & Hearing Specialist. Branch of Child Health, Department of Health & Welfare.	List of children to be screened & those who need further testing: Hearing Conservation Form - interpretation & recommendations wherever a significant hearing loss is indicated.	State Department of Health & Welfare.
Arizona	No state law requiring hearing testing.	Maternal & Child Health Services in the Division of Preventive Medical Services in the State Department of Health. Local school or public health nurse is responsible for own program with help from county or district audiometrist, or State Hearing Consultant.	Individual. School & county statistical records.	Local schools. County health departments. State Department of Health, Maternal & Child Health Services.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Arkansas	No state law requiring hearing testing.	Maternal & Child Health Division of State Health Department.	Individual. Summary reports.	School Maternal & Child Health Division.
California	State laws require identification of children with impaired hearing.	Jointly administered by State Department of Public Health & State Department of Education. Governing board of each school district is responsible for testing.	Minimal reports include: (1) Class list for hearing-screening -- lists of all children who pass or fail screening. (2) Hearing test of each child. (3) Lists of all children failing (or passing), threshold test, test results & pertinent comments. (4) Statistical summaries of daily, monthly & annual reports of testing program & activities of audiometrist.	Local school districts report annually to State Department of Education.
Colorado	Report Not Received.			

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Connecticut	Law requiring each child to receive a physical examination once in 3 years is used as requirement for screening hearing testing.	State Board of Education is responsible for identification audiometry program by providing leadership & assistance. Program is carried out on local school district level. State Department of Health does hearing testing in small rural school districts on a demonstration basis.	Individual results of screening, threshold test, physician's report, & audiological evaluation. Summary reports.	Child's school folder. Local school level.
Delaware	No state law requiring hearing testing.	Jointly supervised by State Board of Health (Crippled Children's Services) & State Department of Public Instruction (Pupil Personnel Services). Local school districts responsible for administration of hearing tests.	Reports & records of testing.	Local school district.
District of Columbia	No law requiring hearing testing.	Bureau of Maternal & Child Health, Department of Health.	Summary of total number tested, number failed, number passed.	Individual schools.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Florida	No state law requiring hearing testing.	Some programs are under the auspices of the State Department of Education, Exceptional Child Education. Some are under the State Board of Health. Bureau of Maternal & Child Health.	No statewide program. Types of records kept by local county school districts vary among the counties.	
Georgia	No state law requiring hearing testing.	Program is carried out on a voluntary basis at local school district level by local health department, with consultative services available from State Department of Public Health, Child Health Service. Method of screening is determined by State Department of Public Health.	Results of threshold test & medical (or other) follow-up treatment procedures. Statistical summary of test results & follow-up procedures.	Local public health nurse. State Department of Health, submitted by each county.
Hawaii	No state law requiring hearing testing.	Program coordinated by speech & hearing specialists; administered by 7 individual districts.	Records of all hearing testing.	Individual District Offices, Special Services Section; public health nurses active on case; schools concerned.
Idaho	No organized statewide identification audiometry program. State Departments of Education and Health are attempting to develop a program.			

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Illinois	No state law requiring hearing testing.	Programs are administered by local school districts. Local health departments may receive grants-in-aid from State Department of Public Health, Division of Preventive Medicine, Bureau of School Health.	Not reported.	
Indiana	Hearing testing is required by state laws. These laws were never implemented through rules & regulations.	Responsibility for conducting hearing testing programs is delegated by law to local boards of education. No state agency has assumed responsibility for follow-up of administration of hearing testing programs. State Board of Health assists in organization & administration of programs on request from local school boards.	No records are kept on state level.	
Iowa	No state law requiring hearing testing. Rules & Regulations of State Department of Public Instruction require hearing testing by personnel in speech and hearing programs approved for State reimbursement. State standards specify criteria.	Program administered by State Department of Public Instruction. Committee on Conservation of Hearing for State of Iowa, sponsored & funded by State Department of Health, serves in an advisory capacity.	Speech or hearing Evaluation Roster. Individual Hearing Evaluation. Speech-Hearing Registration.	Persons having a copy varies among school districts. Sent to parents. State Department of Public Instruction.

TABLE 1 -SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Kansas	State law requires that every school-age child be given a hearing test at least 3 times during first 10 years of school attendance. Method of screening is outlined in state rules & regulations issued by State Board of Education.	Program administered by local school board. State Board of Education & State Department of Health are jointly responsible for supervision of program.	Results of screening & follow-up threshold test. Physician's report & audiological examination.	Child's school folder. School nurse.
Kentucky	No state law requiring hearing testing.	Program administered by State Department of Health & local health departments through regional speech & hearing centers. State Board of Education & State Department of Health are jointly responsible for the program.	Annual report.	Local health department.
Louisiana	Not reported.	Administration of the program varies among school systems. Program administered by: (1)speech therapists,(2)speech therapists, volunteers, nurses from State Department of Health & an audiologist from State Department of Health; or (3) State Department of Health.	Not reported.	

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Maine	State law requires every child be tested at least once every school year. No data on adequacy of enforcement.	School committee or school directors of administrative units are responsible for hearing testing as set forth by state law.	All records are kept on local level.	
Maryland	State law requires testing every 2 years in counties where there is a school physician.	Program administered by State Departments of Health & Education, local health departments & boards of education. Program policy is developed by State Department of Health.	Screening record form. Follow-up testing with audiogram. Referral forms to physician. Report from physician. Report from Hearing Clinic.	School & local health department. State & local health departments.
Massachusetts	State law requires annual testing of hearing of each child in public schools. Testing is to be by means of some form of discrete frequency hearing test.	Program administered by State Department of Health, local health departments & schools.	Recommendations by physicians. Audiogram cards. Health record cards.	School & local health departments & State Department of Health.
Michigan	Not reported.	Program administered by State Department of Health & local health department in cooperation with local schools.	All records.	State Department of Health, local health department, local schools.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Minnesota	No state law requiring hearing testing.	Legally, responsibility for program is under jurisdiction of local school administration & State Department of Education. State Department of Health provides consultative services.	Report from physician or clinic (if returned). Individual report with thresholds for frequencies 500, 1000, 2000 & abstract of medical report.	Child's health record. 3 copies (1) School (2) State Department of Health (3) Consultant for Deaf & Hard-of-Hearing in State Department of Education.
Mississippi	No organized statewide identification audiometry program.			
Missouri	No state law requiring hearing testing.	State Department of Education & State Division of Health cooperate in hearing-screening program.	Hearing test record sheet.	Individual school on school health record & copy to State Division of Health.
Montana	No state law requiring hearing testing.	Program administered by local school administration in areas where there is screening.	No organized statewide identification audiometry program.	

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Adminissration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Nebraska	No state law requiring hearing testing.	Some screening programs are carried out on a local level with assistance or guidance of Hearing Consultant at the State Department of Health & Education, if needed or requested.	Not reported.	
Nevada	Report	Not Received.		
New Hampshire	No state law requiring hearing testing.	Local supervisory union.	Otologic report.	State Department of Education for children with 20 dB loss.
New Jersey	No state law requiring hearing testing.	Program administered by State Department of Education.	Individual screening.	Child's health record card.
New Mexico	No state law requiring hearing testing.	Program administered by Audiological Consultant in State Health & Social Services Department.	No records are kept by state agency.	
New York	Statewide program required by state law.	Program administered by State Education Department.	Individual screening results.	Child's cumulative health record.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
North Carolina	No state law requiring hearing testing.	Program administered by county & city administrative units & assistance from State Department of Public Instruction.	Results of screening.	Child's cumulative folder.
			Statistical summary from each unit.	State Department of Public Instruction.
North Dakota	No state law requiring hearing testing.	Program jointly administered by State Department of Health & State Department of Public Instruction.	All records are kept by person administering program.	
			Number tested.	State agencies.
Ohio	No state law requiring hearing testing.	Program administered by local school boards. State Department of Health prescribes methods & devices to be used & offers consultation.	Some schools report results of screening program to State Department of Health.	
			Reports of follow-up evaluations & treatments.	Local health department or school.
			Records of referrals to Pediatric otological Diagnostic Center.	State Department of Health.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Oklahoma	State "Public Health Code" requiring local or district departments of health to maintain programs on school health services.	Program administered by all county health departments in school systems not having screening programs. State Department of Health prescribes criteria, procedures & consultative services to local health departments and schools.	Individual hearing records. Statistical summary from each county health department in state.	County health department with copy in child's cumulative school health record.
Oregon	No state law requiring hearing testing.	Program administered by county health units; coordinated by State Board of Health & State Department of Education.	(1)Pupils selected for further observation. (2)Teacher's list of pupils for audiometric tests. (3)Annual county summary of hearing tests. (4)Annual Summary of Hearing Tests.	State Board of Health.
Pennsylvania	Statewide program required by state law.	Administered by State Department of Health.	Record of hearing screening test results. Physician's report.	School nurse.
Rhode Island	State law requiring hearing testing.	State Department of Education.	Individual records & recommendations.	State Department of Education.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
South Carolina	No state law requiring hearing testing.	State Department of Education, Hearing & Speech Correction Program is responsible for hearing evaluation.	Individual record of hearing & speech correction program. Test results & recommendations.	State Department of Education, child's permanent record. Child's school folder.
South Dakota	No state law requiring hearing testing.	State Department of Public Instruction, Division of Pupil Personnel Services & University of South Dakota cooperatively sponsor a speech & hearing mobile unit. Division of Pupil Personnel Services is beginning to develop workshops throughout state on identification audiometry.	Physician's report from mobile unit. Individual audiogram.	State Consultant in Speech & Hearing, at University of South Dakota. School & State Department of Public Instruction, Division of Pupil Personnel Services.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Tennessee	No state law requiring hearing testing.	State Department of Education & State Department of Health are jointly responsible for supervision of identification audiometry program. Program is carried out on local school system level.	Individual screening results Survey roster & teacher report. Doctor's or clinical report.	Child's cumulative record. School, county health department, State Department of Education. County health department, regional health department, State Department of Health, local education department, & State Department of Education.
Texas	No state law requiring hearing testing.	State Department of Health gives assistantance & recommendations to local school systems	Results of screening. Annual report of screening from each school district.	Child's permanent health record. State Department of Health.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Utah	No state law requiring hearing testing.	Programs are administered by each district. Clinics are conducted by State Department of Health in outlying & sparsely populated areas.	Hearing conservation report: number screened number retested type of problem referrals.	State Board of Education.
Vermont	Identification audiometry program required by state law.	By state law, responsibility for hearing tests supervision is placed under Director of Physical Education & Health in State Department of Education. Program is administered by Superintendent of State Department of Education with recommendation from State Department of Education in consultation with State Department of Health.	Records. Statistical data.	Local level. State Department of Education.
Virginia	Identification audiometry program required by state law.	State Department of Education & State Department of Health are jointly responsible for program, which is carried out on a local school district level.	Doctor or clinic report. Individual record. Summary report from each county & city.	School nurse. Child's cumulative folder. State Department of Education.

TABLE 1 - SUMMARY OF IDENTIFICATION AUDIOMETRY PROGRAMS BY STATE: JANUARY 1968

Section D - Authority & Administration

State	Statutory Provision	Program Administered By	Records	
			Type	Kept By
Washington	No state law requiring hearing testing.	No organized statewide identification audiometry program. Local school districts are developing programs. State Department of Health is aiding county & city health departments.	Results of screening test, threshold test, physician's report.	Child's school health folder, local health departments, State Health Department & State Superintendent of Public Instruction.
West Virginia	No state law requiring hearing testing.	No organized statewide identification audiometry program. Programs are administered locally by Easter Seal, P.T.A., speech therapists or school nurse.	Screening test sheets & audiogram. Copies of records are not sent to state agency.	Local health department, school health nurse, or speech therapist.
Wisconsin	Report	Not Received		
Wyoming	State law implies that hearing screening is responsibility of school district.	State Department of Education has taken position that they will aid local school districts with hearing screening program. Recently, State Department of Health indicated desire to head up total hearing screening program.	Report of those with "significant losses."	State Department of Education.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Alabama	Residential school for the deaf & blind. Full-time classes.	Board of Directors. Local schools boards; standards are set by Department Special Education, State Department of Education.	Type of education depends on need of child.
Alaska	Classes & speech & hearing therapists. Programs are provided wherever there are 5 or more children with a bilateral loss of 40 or more dB.	Consultant, State Department of Education. Educational Specialist, Bureau of Indian Affairs, Branch of Education & Administrators, Branch of Welfare. Alaska Crippled Children's Association.	Not reported.
Arizona	Residential school. Day classes. Itinerant speech & hearing therapy	Created through the State Legislature, controlled by Board of Directors. Local school board & district administrator, Division of Special Education, State Department of Public Instruction.	Criteria for therapy include: (a) severity of problem, (b) social & emotional maturity, (c) intelligence, (d) existence of other problems.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Arkansas	School for the deaf: day classes & residential services. Day classes. Speech & hearing therapists.	Board of Directors. State Director of Special Education in the Instructional Services Division of the State Department of Education has the responsibility for the educational programs for the hearing impaired.	(a) IQ of 75 or above, (b) better-ear average loss of 50 dB or greater(ISO) & a relatively flat audiometric contour or average of 50 dB or greater (ISO) for 2 better frequencies within 500-2000 frequency range & an abruptly falling audiometric contour, or functions as hard-of-hearing child.
California	State residential schools. Special day classes. Remedial classes in conjunction with regular classes.	State Superintendent of Public Instruction. Legislature has made provisions which require each school district to provide educational opportunities for hearing impaired children age 3 to 18. Special day classes are maintained by governing boards of school district or by county superintendents of schools.	Kind of service child receives depends upon: (a) degree of hearing loss, (b) age at onset of impairment, (c) speech & other language facility, (d) physicial condition, (e) mental & emotional ability & other related factors.
Colorado	Report	Not Received.	

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Connecticut	Residentials schools.	One school controlled by Board of Directors; one is controlled by Board of Trustees & the State Board of Education.	Child is unable to benefit from the regular classroom program supplemented with tutoring.
	Special classes in public schools.	All programs are administered by local school district under the general supervision of the state Speech & Hearing Consultant, State Department of Education, Bureau of Pupil Personnel & Special Educational Services.	Pre-school-age children who have been diagnosed by medical & non-medical specialists as having a hearing impairment. Programs are being planned for 68-69 school year for school-age children with severely impaired hearing.
	Itinerant programs.		Child indicates a need for speech & hearing services.
Delaware	Residential schools for deaf or hard-of-hearing. Day schools for deaf & hard-of-hearing. Classes for deaf or hard-of-hearing. Supportive education (tutoring) from itinerant teacher. Regular class adjustment. Speech reading & speech conservation program from speech & hearing clinician.	Out-of-state program administered by State Department of Public Instruction. All in-state school programs administered at local school district level under general supervision & encouragement of State Department of Public Instruction, Pupil Personnel Services. Pre-school therapy programs are available through State Board of Health, Speech & Hearing Services.	Depends upon needs of child as determined by a committee composed of a speech & hearing therapist, teacher of the deaf, school psychologist & supervisor of the physically handicapped.

TABLE 2- SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
District of Columbia	Residential school. Special classes - day classes for hard-of-hearing & deaf. Itinerant hearing therapy. Speech correction & improvement. Individual instruction in school subjects.	Board of Directors. Director of Special Education. Speech correction, speech improvements & itinerant hearing therapy programs under Director of Speech & Hearing Center.	Recommendations are made for various programs on basis of audiological examination.
Florida	Residential school for deaf & blind. Day classes. Speech/hearing clinicians, itinerant instruction.	Board of Directors responsible directly to State Superintendent of Public Instruction & Board of Education. County school districts administer their own program with financial support from the State Department of Education via State Legislature.	Better-ear average greater than 60 dB at 500, 1000 & 2000 cps. Usually 6 years of age minimum. Must have IQ of at least 80 without other severe handicaps.
Georgia	Residential school. Classes for hearing impaired. Itinerant services.	Vocational Rehabilitation Division of State Department of Education under State Board of Education. State Department of Education sets standards for establishment & maintenance of programs which must be met by local school systems in order for them to receive state funds.	Children between ages of 6-21 if too deaf to go to regular public schools.

TABLE 2- SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Hawaii	Residential school.	State Board of Education.	Children with profound hearing loss who have not developed sufficient language/speech to benefit from regular classroom instruction.
	Resource classes.		Children who can integrate into regular classes wherever possible but require intensive remedial help from resource teacher.
	Remedial speech services.		Children who require speechreading &/or auditory training.
Idaho	Residential school for the deaf.	State Board of Education.	Too deaf to be educated in public schools.
Illinois	Residential schools. Classes provided in many parts of State.	State Department of Children & Family Services.	Not reported.
Indiana	Residential school. Special oral training center classes. Special classes for deaf & hard-of-hearing. Itinerant speech & hearing services. Resource teacher programs.	State Board of Health. State Hearing Commission of the State Board of Education. State Department of Public Instruction, Division of Special Education administers day class programs, resource teacher programs, & itinerant speech & hearing services.	The proper placement of the child is the responsibility of school administrators. Special classes are provided for hearing handicapped where regular school room activity is impractical or impossible & who are not in residential attendance in any state institution, but who, with the advantage of special educational programs, may be expected to benefit from instruction & training.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Iowa	Residential school for deaf. Full-time special classes for hard-of-hearing students with language deficit. Day classes contained in regular schools for deaf students. Resource classes & regular classes for hard-of-hearing with language deficit. Regular classes & such services as hearing conservation, amplification, auditory training, speechreading, etc. for hard-of-hearing students without language.	Created by State Legislature & controlled by State Board of Regents. Other programs are administered by Special Education Division of State Department of Public Instruction.	Recommendations are made for various programs on basis of degree of hearing level & ability to develop language & communication skills.
Kansas	Residential school. Special classes. Itinerant teaching programs.	State Board of Regents. Day school controlled by Board of Trustees. All other programs are administered by local school districts under general supervision of State Department of Public Instruction, Division of Special Education.	Children with greater than 60 dB better-ear loss. Children with 30-60 dB better-ear average loss. Children with 20-30 dB better-ear average loss.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Kentucky	Residential school. Classes for the deaf. Classes for hard-of-hearing. Itinerant program.	All programs are administered by State Department of Education, Division of Special Education.	Criteria for placement in residential school or special class: children whose hearing loss is so severe that they are unable to comprehend & learn speech & language even though hearing aids may be useful to some; generally have a hearing loss of 70 dB(ASA) or more in both ears.
Louisiana	Residential school. Day classes. Speech & hearing therapy.	Controlled by State Board of Education. One day class administered by local school board, & one by local school board & State Board of Education.	Not reported.
Maine	Residential school. Classes for hearing impaired. Supplementary tutoring services. Provision of desk-type amplifier. Home tutoring program.	Controlled by State Department of Mental Health & Corrections State Department of Education subsidizes local communities for supplemental tutoring services, provision of desk-type amplifiers, home tutoring program & classes. State Department of Education also pays cost of secondary education for students who graduate from residential school & who attend residential school in Connecticut.	Not reported.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Maryland	Residential school. Special classes. Itinerant speech &/or hearing clinicians.	Created by State Legislature & controlled by Board of Visitors. State Department of Education establishes framework providing educational services to hearing impaired. Each county board of education develops its own programs within framework established by State.	No fixed eligibility requirements.
Massachusetts	Residential schools for deaf. Day school for deaf. Speechreading & auditory training by speech & hearing specialist for hard-of-hearing.	Each controlled by Board of Trustees. Other programs are administered by State Department of Education, Division of Special Education.	Not reported.
Michigan	Residential school. Special school or classes for those with severe hearing loss who have little or no language. Teacher counselor for hard-of-hearing in regular classes.	Created by State Legislature & controlled by State Department of Education. State Department of Education sets forth rules & regulations governing all other educational programs.	Educational classification for children with hearing loss should be considered flexible depending upon: (a)age at onset (b)general physical condition (c)social adjustment (d)intellectual & academic abilities (e)willingness of principal & regular teachers to accept child (f)family understanding & cooperation (g)preparation & background of speech correctionist, special teacher or teacher counselor who is to help such pupils. An otolaryngologist must certify diagnosis of all children enrolled in approved educational programs.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Minnesota	Residential school for deaf. Day classes for deaf. Speech therapy.	Administered by Department of Public Welfare. All day school programs are administered by Hearing Consultant in State Department of Education, Special Education Section. Consultation services for educational programs are provided on request by Hearing Consultant in State Department of Education.	Level of ability to function in an academic setting, not degree of hearing loss, determines amount & type of instruction. Some characteristics of need are: (1)defective speech (2)reading problems (3)lowered level of abstractions in use of language (4)social inadequacy arising from frustrations.
Mississippi	Residential schools. Day school. Some educational programs are available in schools throughout the state.	One residential school is controlled by Board of Trustees; one was created through the State Legislature & is controlled by State Department of Education & Board of Trustees.	Not reported.
Missouri	Residential school. Day school. Special classes.	Controlled by State Department of Education. Controlled by local school board. Controlled by local school boards & State Department of Education.	Not reported.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Montana	Residential school. Day classes.	Created by State Legislature & is controlled by State Board of Education. Administered by local school district under general supervision Department of Public Instruction.	Not reported.
Nebraska	Residential school. Day classes in one school.	Nebraska State Department of Education. Local school board.	Admittance to these programs is based on the information from psychological, medical, otologic & audiological examinations.
Nevada	Report	Not Received.	
New Hampshire	Residential school.	Board of Trustees. State Department of Education has authority to pay for out-of-state training.	Not reported.
New Jersey	Residential school. Day school. Special classes. Supplemental instruction.	Created by State Legislature & controlled by State Department of Education. Administered by local school board. State Department of Education administers special classes.	Determination of kind of services for which a child may be eligible comes from a child study team in each local district.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
New Mexico	Residential school. Day classes. Pre-school oral training. Oral day school classes. Speech & Hearing therapists.	Board of Regents. Albuquerque Hearing & Speech Center. Local school board.	Hearing loss great enough that child cannot achieve in public schools.
New York	Residential schools. Day schools. Special classes - conservation of hearing classes. Itinerant program. Regular class with supplementary instructional assistance.	Residential & day schools are variously controlled by State Education Department, Boards of Trustees, State Department of Public Welfare, State Board of Social Welfare, Board of Directors & local school boards. State Education Department, Division for Handicapped Children has responsibility for providing professional advice & guidance to local public school districts in relation to duties & general management of programs for handicapped children.	Kind of service needed depends upon such factors as (a)degree of hearing loss (b)age at onset (c)speech & other language facility (d)physical condition (e)mental ability (f)emotional stability.
North Carolina	Residential schools. Speech therapists.	Board of Directors. All other programs are administered by local school districts under general supervision of State Department of Public Instruction, Speech & Hearing Special Education Section.	Not reported.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
North Dakota	Residential school for deaf & hard-of-hearing. Day class(full-time) for hard-of-hearing. Supplementary instruction & acoustic aids. Medical & educational consultation. Speech correction & language training.	Created by State Legislature & controlled by Board of Administration. Local school board.	Not reported.
Ohio	Residential school. Day school. Classes for deaf & hard-of-hearing. Speech & hearing therapy.	Created by State Legislature & controlled by State Department of Education. Local school board. Local school board & in some cases under supervision of State Department of Education.	Children are referred for educational placement on basis of findings of otologist, school psychologist & educator.
Oklahoma	Residential school for deaf. Day school for deaf. Classes for hard-of-hearing.	State Department of Public Welfare. Department of Communication Disorders, Oklahoma University Medical Center. Local school boards.	Eligibility for services based on medical findings, speech & hearing clinical services of universities & public health guidance centers & educational consultation.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Oregon	Special schools for children whose loss is great enough to interfere with language development & educational programs. Special classes. Speech & hearing therapists.	Residential school administered by State Board of Control. State law stipulates that local school districts shall provide special education for hearing impaired children or may contract with another district for such services if there are too few such children in district to provide a program.	Minimum requirements are that a child must have an average loss of 35dB(ISO) in the speech range in better ear. Certification for eligibility requires a determination made on the advice of qualified educational & medical authorities that child has the mental health & ability to benefit from special education.
Pennsylvania	Residential schools. Day schools.	Programs centrally directed by State Department of Public Instruction. Each residential school is controlled by a Board of Trustees. Day school is controlled by local school board.	Residential & day schools, as certified by otologic & audiological report: (a)child's hearing may be non-functional for ordinary purposes of life or (b)child's hearing loss precludes use of auditory stimuli as main avenue of learning & forces dependence upon other modalities or (c)child's acuity of hearing &/or its integrative processes interfere with normal acquisition & use of meaningful language concepts. Over 60 dB(ASA) better-ear loss.
	Special classes.		Special classes - 30-60 db(ASA) better-ear loss.
	Itinerant teaching program.		Itinerant teaching program - 20-30 dB (ASA) better-ear loss.
Rhode Island	Residential school for deaf. Day classes/itinerant program.	Administered by State Board of Education. Administered by school districts.	Not reported.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
South Carolina	Residential school. Classes for hearing impaired. Itinerant program.	Board of Commissioners. Classes & itinerant program are administered by State Department of Education.	Not reported.
South Dakota	Residential school - deaf education with hearing & speech center available. Speech therapy & speechreading to hearing impaired students.	State Board of Regents.	Not reported.
Tennessee	Residential school. Special classes for severely hard-of-hearing &/or deaf. Itinerant program. Speech & hearing therapists.	All programs are administered by the local school board under the general supervision of the State Department of Special Education.	Eligibility determined by an otological or an audiological examination.
Texas	Residential school. Public day classes. Countywide & multi-countywide day school for deaf. Local pre-school day classes. Speech & hearing therapy.	State Education Agency. All other programs are administered by local school districts under authorization & subject to audit, program review, &/or accreditation.	Pupil eligibility determined by: (a)chronological age,(b)grade placement & academic achievement level, (c)written comprehensive psychological report, (d)physician's report describing handicap, (e) audiogram, (f) recommendation of local placement committee, (g) parental approval.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Utah	Residential school. Day classes. Itinerant programs. Speech & hearing correctionists.	Programs are administered by State Board of Education.	Not reported.
Vermont	Those with severe losses are referred to residential school or to State Association for the Crippled. No local services other than diagnostic services.	Residential school controlled by Board of Trustees.	Not reported.
Virginia	Residential schools. Some services available in: Easter Seal Centers; public schools; clinical speech & hearing centers; Crippled Children's Bureau; pre-school age centers for deaf.	One controlled by Board of Visitors & one by Board of Directors. All other programs are administered by local school districts under general supervision of State Department of Special Education.	Must be resident of Virginia, age 6 to 20 years.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section A - Types of Services, Administration and Eligibility

State	Types of Services	Authority and Administration	Eligibility
Washington	Residential school. Day school. Special classes. Itinerant teaching program.	Department of Institutions, Division for the Handicapped. Local school district. All other programs are administered by local school districts under general supervision of State Superintendent of Public Instruction, Division of Special Education	Not reported.
West Virginia	Residential school. Special class. Itinerant program.	State Department of Education Local school. State Director of Special Education helps coordinate programs at local level.	Not reported.
Wisconsin	Report	Not Received.	
Wyoming	Residential school. Special class. Itinerant program.	State Department of Education, State Commissioners. Local school district.	Criteria is permissive.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records-	
		Type	Kept By
Alabama	1967: Residential school - 480 deaf 30 deaf blind. Classes - 12 classes, 200 children.	Individual. Individual.	School. Local schools.
Alaska	1967: 6 classes; 10 therapists. Program at Hooper Bay; some children sent out of state to schools in Washington, Oregon or Utah. Two therapists; 1 class for pre-school deaf.	Individual. Crippled Children's Service summary card.	School districts. State Department of Health & Welfare.
Arizona	1967: Residential school - 240 students. Day class - 32 students.	Individual. Individual.	School. School.
Arkansas	1967: Residential & day school - 310 students 1968: 1 day class program - 20 students.	Individual. Individual.	School. School.
California	1967: Residential school - 950 students. Day schools - 375 students. Day classes - 2600 students. Classes for multiply handicapped - 100 students. 1963-64: Number using hearing aid - 1635. Number using desk aid - 641.	Not Reported.	
Colorado	Report Not Received.		

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Connecticut	1966-67: 2 residential schools - 627 students. Special classes - 100 students. Itinerant programs - 300 students. 225 speech & hearing clinicians serving both speech handicapped & hearing handicapped.	Annual report.	Local school administrator. Copy is often sent to the State Speech & Hearing Consultant.
Delaware	1966-67: Out-of-state residential & day classes - 34 students full-time. In-state day classes - 49 students full-time. Itinerant services - 90 students. 20 speech & hearing clinicians provide services for both speech handicapped & hearing impaired. 7 clinicians provide services to pre-school children.	Annual report submitted by school nurses & speech & hearing clinicians.	State Department of Public Instruction, Public Personnel Services.
District of Columbia	1966-67: Residential & day school - 158 students. 1 day class - 51 students. 121 children serviced by hearing therapists. 12 children serviced by speech therapists. 5 hearing therapists. 2 speech therapists service schools with hearing conservation classes.	End of year records. Individual record of hearing therapy.	Speech & hearing center.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Florida	1967: Residential school for the deaf & blind; 465 students age 6-20; 80 teachers. 1966-67: 48 teachers for programs for deaf. 750 hard-of-hearing children in programs in 31 county school districts. 462 deaf children in programs in 21 county school districts. 1965-66: 11 county school districts with special classes for deaf - 516 pupils. 4 county school districts with itinerant instruction - 742 students. 11 county school districts with comprehensive programs - 62 pupils.	List of deaf children kept by principal of each school.	List sent by principal to county superintendent & then to State Superintendent who forwards this list to President of Florida School for Deaf & Blind.
Georgia	1966-67: Residential school - 500 students. 1967-68: 7 classes for hearing impaired. 8 itinerant programs.	Individual.	School.
Hawaii	1966-67: Residential school - 115 students. 4 hard-of-hearing resource classes 3 elementary 1 intermediate. 20 speech & hearing specialists.	Individual.	School.
Idaho	1966-67: Residential school - 121 students.	Individual.	School.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Illinois	1966-67: Residential school - 467 students. 32 day classes - 1612 students. 5 classes for multiply handicapped - 86 students.	Individual.	School.
Indiana	1966-67: Residential school - 620 students. 4 special oral training center classes. 15 special classes for deaf & hard-of-hearing. All special classes - 147 students. Speech & hearing therapists serve approximately 900 hearing impaired children.	Summary report of program.	State Board of Education.
Iowa	1966-67: Residential school - 335 students. 917 hearing handicapped children receiving regularly scheduled special education services. 9027 hearing handicapped children receiving indirect periodic consultative or other services. 301 hearing handicapped children on waiting list for regularly scheduled direct special education services.	Individual records. Summary reports.	Local level. State Department of Public Instruction.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

State	Statistical Summary	Records	
		Type	Kept By
Kansas	1966-67: Residential school - 340 students. 3 special classes - 20 students. 9 itinerant programs - 150-200 students. 170 speech & hearing clinicians providing services for both speech handicapped & hearing handicapped children.	Class enrollment of hard-of-hearing. Speech & hearing program report.	Both kept by State Department of Public Instruction.
Kentucky	1966-67: Residential school - 325 students. 6 classes for deaf & 6 classes for hard-of-hearing serving approximately 100 students. 52 speech & hearing programs.	Annual report of classes.	State Department of Education, Division of Special Education.
Louisiana	1966-67: 2 residential schools - 500 students. 2 day classes - 70 students. 134 speech & hearing therapists serving 414 children.	Individual.	School.
Maine	1966-67: Residential school - 150 students. 2 classes.	Individual.	School.
Maryland	1966-67: Residential school - 300 students. Number of hearing impaired - 508 students. 39 special classes for speech & hearing handicapped - 379 students.	Annual report of speech & hearing programs in each local unit.	State Department of Education.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Massachusetts	1966-67: 3 residential schools - 574 students. (Approximately 112 students in 4 residential schools outside of state). 1 day school - 100 students. Day classes - 66 students. 300 speech & hearing specialists in 180 communities. 1500 hard-of-hearing children receiving some form of "speech assistance" in public schools.	Individual.	School.
Michigan	1966-67: Residential school - 440 students. Day classes & schools in local districts - 903 students. Teacher counselor programs in local districts - 723 students.	Audiological records.	County or city health department & in school.
Minnesota	1965-66: Residential school - 288 students; 38 full-time teachers. Day classes for deaf - 453 students; 55 full-time teachers; 60 part-time teachers. 1010 school-age children estimated to have severe hearing loss. 5055 school-age children estimated to have mild to moderate hearing loss. 240 speech therapists providing services to hearing impaired. The State Health Department estimates 34,000 children with medically significant losses based on a 3% referral rate.	Information relating to individual. "Supplemental Instruction for Handicapped Children" form.	State Department of Education, Special Education Section.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Mississippi	1966-67: 2 residential schools - 280 students. 1 day class - 25 students.	Individual.	School.
Missouri	1966-67: Residential school - 360 students. Day school - 110 students. Special classes - 250 students.	Individual.	School.
Montana	1966-67: Residential school - 70 students.	Medical report & application form.	State Department of Public Instruction.
Nebraska	1967-68: Residential school - 160 students. 1966-67: Classes - 26 students.	Individual.	School.
Nevada	Report Not Received.		
New Hampshire	1966-67: Residential school - 110 students.	Individual.	School.
New Jersey	1966-67: Residential school - 500 students. Day school - 140 students. 1965-66: 37 classes for deaf & hard-of-hearing. 695 deaf & hard-of-hearing children enrolled in special education.	Individual.	School.
New Mexico	1966-67: Residential school - 200 students. 2 day schools - 15 students.	School reports - audiological & psychological.	State school for deaf & local districts.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
New York	1966-67: 7 residential schools - 1526 students. 2 day schools - 497 students. 24 day classes - 1360 students. 1 class for multiply handicapped - 12 students.	School report of child having hearing handicap	One copy to State Education Department, Bureau of Health Service. One copy to Chief School Administrator. One copy in child's cumulative health folder.
North Carolina	1966-67: 3 residential schools - 824 students. 223 speech therapists servicing 422 hard-of-hearing students.	Child's cumulative health folder. Speech & hearing therapist record.	Cumulative report at the end of the year to the State Department of Public Instruction, Speech & Hearing, Special Education Section.
North Dakota	1966-67: Residential school - 90 students. Full-time class - 6 students. 10 students receiving supplementary instruction & acoustical aids in public schools not operating special classes. 80 students receiving speech correction & language training.	Annual reports of individual - children's progress.	State School for the Deaf.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Ohio	1966-67: Residential school - 270 students. Day school - 160 students. Classes for deaf - 1250 students. Classes for hard-of-hearing - 236 students. 169 teachers of classes for deaf & hard-of-hearing. 45,000 children received services in public school speech & hearing programs.	Annual summary reports.	State Department of Education.
Oklahoma	1967-68: 7 classes - 72 students. 1966-67: Residential school - 223 students. 14 classes for hard-of-hearing in public schools - 100 students.	Annual summary reports.	Respective state agencies &/or schools.
Oregon	1966-67: Residential school - 300 students. Day school - 100 students. Classes - 120 students.	Individual.	School.
Pennsylvania	1966-67: Day school - 220 students. Classes - approximately 700 students Itinerant programs - approximately 2000 students. 1965-66: 3 residential schools - 1076 students. 1964-65: 47 special classes - 393 students. Itinerant teaching programs - - 1749 students.	Individual.	School.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Rhode Island	1966-67: Residential school - 123 students. Itinerant program - approximately 100 students.	Medical, audiological, psychological & educational.	School program.
South Carolina	1966-67: Residential school - 330-students. 2 classes for hearing impaired. 44 speech clinicians work with hearing impaired only in so far as speech is concerned.	Annual report of attendance at end of school year. Initial report of attendance at beginning of school year.	State Department of Education.
South Dakota	1966-67: Residential school - 125 students.	Individual.	School.
Tennessee	1966-67: Residential school - 368 students. Special classes -243 students; 18 teachers. Itinerant program - 84 students. 140 speech & hearing therapists provide services to hearing impaired & speech handicapped.	Annual report containing audiological information as well as educational information for each child receiving special educational services.	Regional supervisor of special education.
Texas	1966-67: Residential school - 660 students. 28 local day classes - 255 students. 6 county-wide & multi-county-wide schools for deaf; 760 students; 95 teachers. 674 speech & hearing therapists providing services for both speech handicapped & hearing handicapped children serving approximately 64,900 students.	Report of number of eligible pupils.	State Education Agency.
		All other records.	Local level.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Utah	1966-67: Residential school - 170 students. Day classes - 90 students.	Report of students enrolled in special education programs for the hearing impaired. Report of students classified as hearing impaired.	State Board of Education State Board of Education
Vermont	1966-67; Residential school - 100 students.	Individual.	School.
Virginia	1966-67: 2 residential schools - 590 students 2 counties & 2 cities provide other services in public schools. 8 Easter Seal Centers. 12 clinical speech & hearing Centers. 1 Crippled Children's Bureau. 2 pre-school age centers for deaf.	Special education summary report from school divisions.	State Department of Education.
Washington	1966-67: Residential school - 300 students. Day school - 50 students. Special classes - 236 deaf & 237 hard-of-hearing students. 243 speech therapists(not all serve deaf). 18 school districts provide services for hearing impaired.	Individual.	School.
West Virginia	1966-67: Residential school - 210 students. Special class - 10 students. 23 speech therapists.	Individual.	School.

TABLE 2 - SUMMARY OF EDUCATIONAL SERVICES FOR HEARING IMPAIRED CHILDREN BY STATE: JANUARY 1968

Section B - Statistical Summary and Records

State	Statistical Summary	Records	
		Type	Kept By
Wisconsin	Report Not Received.		
Wyoming	1966-67: Residential school - 51 students. 7 full-time teachers. 2 active supportive personnel in classroom. Special class - 1 teacher of deaf. 11 speech therapists.	Individual.	School.

APPENDIX III

Reporting Form.

Individual Report of Person With Impaired Hearing

A. Identifying Information

NAME: ________________ Date of Birth ________________ Sex ☐ M ☐ F
(Last) (First) (Middle) (Month, Day, Year)

ADDRESS: ________________
(Number & Street) (City) (County) (State and ZIP Code)

PRESENT SCHOOL: ________________
(Name)

LOCATION: ________________
(Number & Street) (City) (County) (State and ZIP Code)

PRESENT GRADE OR LEVEL IN SCHOOL ________ TOTAL FULL YEARS ATTENDED THIS SCHOOL ________

STUDENT NOW ATTENDS: ☐ Regular Classes Only ☐ Regular Classes Plus Special Training ☐ Special Classes for the Hearing Impaired School for the Deaf ☐ Public or ☐ Private ☐ Residential or ☐ Day

TOTAL FULL YEARS ATTENDED OTHER SCHOOLS: Regular Schools: ________ Classes for the Hearing Impaired: ________ Schools for the Deaf: ________

B. Educational Status

1. ACHIEVEMENT TESTS: (Complete for students 10 years of age or over)

Description of Test (Name, Form No., Battery Level)		Reading Level	Battery Median	Date Tested
		SCORES		
Most recent test	________	________	________	________
About 12 mos. earlier	________	________	________	________
About 24 mos. earlier	________	________	________	________

2. PSYCHOLOGICAL TESTS:

Description of Test (Name, Form)	Results	Date Tested
________	________	________
________	________	________
________	________	________

3. EDUCATIONAL NEEDS:

☐ Should be in Special School or Classes for Hearing Impaired Children
☐ Can Perform Satisfactorily in Regular Classes with Supplemental Training by Speech and Hearing Therapist
☐ Can Perform Satisfactorily in Regular Classes

4. HANDICAPPING CONDITIONS: (Check all significant handicapping conditions)

☐ Cerebral Palsy
☐ Cleft Lip or Palate
☐ Other (describe) ________________
____
____

☐ Severe Visual
☐ Mental Retardation

☐ Aphasia
☐ Emotional Problems

COMMENTS:

C. Hearing Aid Use:

Child does not use aid ☐

Child uses: ☐ Monaural Aid ☐ Binaural Aid

Child uses aid:	At Home		At School
	☐	Most of the time	☐
	☐	Occasionally	☐
	☐	Seldom	☐

Hearing threshold with aid is ________ dB ☐ Don't know

D. Ability to Communicate

1. RECEPTIVE

(a) Indicate ability to hear and understand both **with and without** a hearing aid. If person does not use a hearing aid, record ability to hear and understand without a hearing aid.

With a Hearing Aid		Without a Hearing Aid
☐	Can Hear and Understand Most Speech	☐
☐	Can Hear and Understand Some Speech	☐
☐	Cannot Hear and Understand Any Speech	☐

(b) Lipreading Ability ☐ Good ☐ Fair ☐ None

(c) Reading Ability ☐ Good ☐ Fair ☐ None

2. EXPRESSIVE:

☐ Others Can Understand Most of His Speech
☐ Others Can Understand Only a Little of His Speech
☐ Others Cannot Understand His Speech

(a) Indicate Methods Used to Communicate to Others:

☐ Speech ☐ Writing ☐ Manual Alphabet ☐ Sign Language

☐ Other (describe): ______________________________
____

E. Audiological Findings

1. Air Conduction

	RIGHT EAR								LEFT EAR							
Frequency	125	250	500	1000	2000	4000	6000	8000	125	250	500	1000	2000	4000	6000	8000
Hearing Level																

Check Standard Used: ☐ ISO ☐ ASA

2. Speech Threshold:

Check test used: ☐ SAT (1953 ASA) ☐ SRT (1953 ASA) ☐ Not tested

Right		Left	Right		Left
☐	0-15 dB	☐	☐	45-59 dB	☐
☐	16-29 db	☐	☐	60-79 dB	☐
☐	30-44 dB	☐	☐	80 dB and over	☐

3. Probable Age of Onset of Hearing Loss: ________ Years of Age ☐ At Birth

---

Name of Clinic or Place
Conducting Examination: ______________________________ Date: ______________

Address: ______________________________
(Number and Street) (City) (State and ZIP Code)

Profession of Examiner: ☐ Audiologist ☐ Otologist ☐ Other M.D. ☐ Other (Specify) ______________

APPENDIX IV

Materials Used in the National Survey of Identification Audiometry Programs and Educational Services for the Hearing Impaired.

GALLAUDET COLLEGE
KENDALL GREEN, WASHINGTON, D.C. 20002

OFFICE OF PSYCHOLOGICAL RESEARCH

In February of 1966 under a grant from the U. S. Office of Education, Gallaudet College began a project to develop a nationwide system for reporting hearing impaired children.

The need for national information on hearing impairment has been expressed by most organizations and individuals concerned with the problems of this population. The lack of reliable data is apparent. Essentially, the reporting system will provide the information necessary for more accurately planning for the facilities and personnel needed to provide adequate educational and health services for the hearing impaired. The reports will give program supervisors the opportunity to compare their programs with programs in other areas and Researchers will have a source from which to draw accurate local and national samples of hearing impaired persons.

One of the data collection methods being considered is to obtain an individual record on each school-age child with impaired hearing including those in special schools and classes and those in regular schools. It is recognized that some areas of the country, because of inadequate identification programs and related services, may require some time before they can realistically participate on a statewide basis in the reporting system. For such states, the system can be initiated for those parts of the state (counties or school districts) that do have systematic identification programs. Additional areas of the state then could be added when they are able to participate.

A first step in this project is to ascertain the status of identification audiometry and of programs of educational and health services for the hearing impaired, in order to determine if there is some program through which statewide statistics can be readily obtained. Accordingly, we are now conducting a survey of all the states to obtain detailed information about these activities. It should be noted that, since there is at present no ready reference source for this type of information on a nationwide basis, it is planned to publish the results of this study as a separate publication. Such a publication should be of interest to many persons and useful for many purposes unrelated to the establishment of a reporting system.

We are now soliciting your help in assembling the information for your state. Attachment A contains a series of questions. The answers to these questions will enable us to prepare a comprehensive report. We will be pleased to accept copies of printed or typewritten materials that will provide the answer to any of the questions.

To further assist you in preparing a reply, Attachments B and C illustrate some typical answers that we have received from states that have already responsed to this survey.

We would appreciate hearing from you as soon as possible. If you have questions, please do not hesitate to contact us. If this query is going to be handled by someone other than yourself, please let us know to whom we should address future communications.

We realize that it will require a considerable amount of time to prepare your response to this survey. However, by assisting us in this major attempt to develop a systematic body of information about the hearing impaired, you will be making it possible for all of us to provide better services for hearing handicapped children.

Attachment A

Guidelines and Questions
for Preparing State Report

I. General

In the sections that follow we have listed a series of questions that are designed to provide us with a comprehensive description of identification audiometry (hearing screening) programs, and the availability of educational and health services for hearing impaired children in your state.

Please answer the questions as completely as possible. If some information is not available, please tell us so. Wherever appropriate, you may substitute copies of papers, laws, guidelines or other printed material that describe any or all of the activities we are interested in.

In some states the activities we seek information about are conducted at the county or local level without any supervision or direction from the state government. In the event that you know that some counties are carrying out these programs, but you do not have detailed information about them, we would appreciate receiving the names of the counties and, if possible, the name and title of a person that we might contact directly for further information.

II. Information About Identification Audiometry

A. Authority and Administration

Is there a state law requiring that school children have hearing tests? If yes, please describe the law or submit a copy of the law.

Please describe the authority, responsibilities, and activities of agencies at the state level who may be engaged in hearing screening programs. Also give official names of these agencies.

B. Coverage

Please give the names of all counties or other areas in the state that conduct hearing screening programs on a regular basis. If all areas of the state conduct programs just indicate "entire state covered."

Please give for each area of the state conducting screening programs the following information:

How often are children tested?
What ages or grades are tested annually?
Who administers the program in each area?

C. Testing

If the methods and standards used in the hearing-screening programs are not the same in all areas of the state, please answer the following questions as they apply to each area.

What kind of hearing test is used?

If audiometric tests are used, at what frequencies are children tested?

Indicate the failure levels in dB's. Indicate whether ASA or ISO standards are used.

Are children tested individually or in groups? What are the qualifications and training requirements for the persons who conduct the screening tests?

Are there provisions for follow-up screening test? If so, what procedures are used in the second test?

What procedures are used for referrals for further audiological and otological examinations for those who fail screening tests? Is a doctor or clinic report required? Who keeps these reports? Who makes referrals for special educational services? Who determines if special educational aids or services are needed?

What kind of records are kept on the results of the screening tests? Who keeps these records? Are copies of records sent to a state agency? Please enclose copies of any statistical summaries of the results of screening programs that you have available.

III. Information About Educational Services

Describe the authority, responsibilities, title and activities of any agency at the state level, that provides special educational services for the hearing impaired.

What kind of educational services are available for children with loss of hearing? If the services vary from county to county, please describe the services that are available for each county separately.

Describe the basis for determining the kind of services a child may be eligible for. If possible, give estimates of the number of children who are receiving each type of special training?

List all schools which have special classes for the hearing impaired. Do the children attend these classes full time or part time?

If possible, give the number of teachers that are teaching in special classes.

Are there any speech and hearing therapists that are providing services to the hearing impaired? How many therapists? How many children do they serve? What kind of records are kept on children receiving special educational services? Are any records kept at the state level? If so, please submit blank copies.

IV. Health Services

Please describe in the same detail as asked for on the section on educational services, the extent, type and eligibility standards for health services provided for hearing impaired children.

If any health records are kept at the state level, please submit blank copies of forms used to keep these records. Are there any records kept at the state level or local level which give the results of audiometric examinations?

V. The Reporting Form

Attached to these materials are copies of individual reporting forms now being used in some states to provide information for the reporting system.

Please tell us if it would be possible to receive similar information from all or some of the hearing impaired children in your state? Please describe, fully, your ability to participate in this system.

Attachment B

Sample A

Hypothetical answers from a state with a well-coordinated program, at the state level, of identification audiometry and other services for the hearing impaired.

I. Identification Audiometry Programs

A. Authority and Administration

1. State law requires that every school-age child be given a hearing test at least three times during the first 10 years of school attendance. The method of screening is outlined in the State rules and regulations issued by the State Board of Education. Details are given below. A copy of the law and the rules and regulations are enclosed.

2. The State Board of Education and the State Department of Health are jointly responsible for the supervision of the identification audiometry program. The program is carried out on a local school district level.

B. Coverage

1. The entire State is covered.

2. All children in grades 1, 3, 5, 7, and 10 are screened. All new children are screened.

3. The administration of the hearing screening program is the responsibility of the local school board.

C. Testing

1. A pure-tone audiometer is used for testing. The audiometer must be calibrated at least every two years under the supervision of the State Department of Health.

2. For initial screening children are tested individually in 20 counties and in groups in 15 counties.

3. The following frequencies are tested:

   250, 500, 1000, 2000, 4000, 8000 cps.

4. Failure levels are 15-20 dB (ASA) for two or more frequencies and 30 dB (ASA) for one or more frequencies.

5. A follow-up threshold test is given on an individual basis to all children:

   (a) Who fail the screening test

   (b) Who have a history of ear and/or upper respiratory infection

   (c) Who are recommended by classroom teacher or speech and hearing therapist. The frequencies used and failure levels for follow-up threshold testing are the same as for the initial screening.

6. All children who do not pass follow-up threshold testing are referred for further audiological testing and otologic examination. The child's family is responsible for arranging for the otologic examination by a physician. A form is returned to the school. If an audiologic examination is recommended, the school nurse or the parents may arrange for a free examination at a Speech and Hearing Clinic.

7. If a significant hearing impairment remains after medical treatment, a referral is made by the school nurse or principal to the Supervisor of Special Education of the local school district for a determination of the child's special educational needs.

8. Hearing tests are conducted by audiologists, speech and hearing therapists, trained technicians or school nurses who are trained to conduct these tests.

91 Results of the screening test are recorded in each child's school folder. A copy of follow-up threshold testing is also kept in the school folder. The physician's report and audiologic examination are kept by the school nurse.

A statistical summary of the results of screening programs is enclosed.

III. Educational Services

1. All programs are administered by the local school district under the general supervision of the State Department of Special Education.

2. Types of Programs and Eligibility

   (a) Itinerant teaching programs are provided twice a week for 1/2 hour sessions for children who have a 20-30 dB better ear average loss.

   (b) Special classes are provided for children with a 30-60 dB better ear loss. These are full-time classes in a regular school building.

   (c) Children with greater than a 60 dB better ear loss are eligible for special schools for the deaf. A copy of materials describing programs is enclosed.

3. Estimate of number receiving services

   (a) Itinerant program: 1500

   (b) Special classes: 500

   (c) Special schools: 1000

4. There are 500 speech and hearing therapists who are providing services for both speech-handicapped and hearing-handicapped children. Each therapist is limited to a caseload of 65 students. There are 45 teachers who conduct special classes. They are either speech and hearing therapists or teachers with a background in special education or speech and hearing.

5. An annual report on a standard form on each child receiving special educational training is sent to the State Supervisor of Speech and Hearing Programs. These reports contain audiometric information as well as educational information. A blank form is enclosed.

IV. Health Services

1. All programs are administered by local Departments of Health under the authority of the State Board of Education.

2. Types of programs and eligibility - Hearing aid evaluations and follow-up checks on efficiency of aid are provided. Audiological and otological examinations are available. Follow-up medical treatment is available. These services are available for children with a 15 dB or greater loss in the better ear.

3. Records of services provided are kept at the local level.

V. Individual Reporting Form

Presently most of the information on the individual reporting form (Attachment D) can be obtained from the State form. However, the information on hearing aid use and communication skills would have to be obtained from the individual schools. It may be possible to modify the State form to include these items at a later date.

The State Board of Education and the State Department of Health would be willing to arrange for the completion of these forms and to discuss further participation in the reporting system.

Contact:

Miss Jane Jones
State Supervisor of Special Education

and

Mr. James Doe, Director
State Health Department

Attachment C

Sample B

hypothetical answers from a state that does not have a statewide program of identification audiometry or other services for hearing-impaired children.

I. Identification Audiometry

A. Authority and Administration

State laws require that the superintendent of each school district annually make known to the State Superintendent of Schools the number of children who require special educational services (health services) because of loss of hearing. (A copy of the law is enclosed). The State Department of Education has no authority over the local school districts and there is no Statewide coordinated program of identification audiometry. Recently, the State Health Department has employed an audiologist who is developing guidelines and standards and recommendations for developing hearing-screening programs throughout the State.

B. Coverage

There are, at the present time, two counties and two cities in the State that regularly conduct hearing-screening tests. A complete description of the program in County A in enclosed. For further information about County B write to Mr. John Doe, County B Education Department. For information about the programs in the two cities write to Mrs. John Roe, City Health Department, ______________, ______________ and Mrs. Sarah Jones, City Department of Education, ___________, __________.

C. Testing

See B above.

II. Educational Services

The State Department of Education provides the superintendent of each school district with a fixed number of dollars per year for each child reported to have a hearing loss. These funds are designed to provide special educational services for these children. Each school district is required to send an annual report on every child that receives special services. A copy of this report is enclosed.

Each school district employs the type of teachers and develops its own training programs to meet the needs of the hearing impaired children.

Recently, the State Department of Education has employed a Supervisor of Speech and Hearing Programs, who is now preparing guidelines and standards for use in the education of hearing-impaired children. When these guidelines have been completed, they will be distributed to the local areas for comments and for what it is hoped will be general acceptance by the school districts.

It is suggested that you write directly to the two counties and two cities for more details about the educational programs in those areas.

Enclosed is a copy of a statistical report showing the number of children receiving special education in each county of the State and also the number of full-time and part-time teachers employed in these programs in each county. For further information, you should contact the superintendent of education in each county. (A list of these is enclosed.)

Also enclosed is a list of all schools in the State that have special classes for the hearing impaired. The list is a few years old. Therefore, it is suggested that you obtain more recent information when you write to the local superintendents.

III. Health Services

The situation with respect to health services is similar to that of the educational services. The State Health Department provides funds for hearing aids and other clincial services to each county. Records of individuals receiving this assistance are required by the State Health Department.

For further information you should write to the County Health Officer of each county. However, we are enclosing some material we have that describes health department activities in a few of the counties.

IV. Individual Reporting Form

Except for the two counties and two cities with well-developed identification audiometry and programs of health and educational services, we do not believe we could provide much information on the rest of the State. We can make available some limited amount of information on those that are reported to the State Department of Education as requiring special educational services. Also the State Department of Education would be willing to cooperate with you in seeking to obtain the data from the two counties and two cities previously mentioned.

We believe it may be 3 or 4 years before identification has progressed to the point that adequate statewide records will be available.

APPENDIX V.

Selected Letters Expressing Interest in a National Census of Hearing Impaired Children.

GEORGE ROMNEY, Governor
ALBERT E. HEUSTIS, M.D., Director

STATE OF MICHIGAN
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF MATERNAL AND CHILD HEALTH
252 HOLLISTER BUILDING, P.O. BOX 1258, LANSING, MICHIGAN 48904

July 20, 1967

Augustine Gentile, Ph.D.
Research Professor
Demographic & Educational Statistics
Gallaudet College
Kendall Green
Washington, D.C. 20002

Dear Doctor Gentile:

Doctor Mary Blair of the State Department of Education has referred your letter of April 26th to our office. We will be pleased to cooperate in any way that we can in a national reporting system.

Our situation in Michigan is a rather complicated one. Identification audiometry is generally considered a health service throughout the state and identification programs are administered by local health departments with the cooperation and consultation of our state office. However, each program is to a large degree autonomous, and standards and procedures are not identical throughout the state.

Phases of the program concerning educational placement and programs of hearing impaired children do not fall into our area of operation but are the responsibility of the special education program administered by the State Department of Public Instruction.

Therefore, the information that you request, insofar as it pertains to the identification of the audiometry program, will require considerable compilation on our part since each separate health department in the state will be involved. Since you have originally written Doctor Blair, I assume that she will provide you the information required concerning special education programs.

We will be writing you in the future when we are able to do a little more compilation of information.

Sincerely,

Joseph L. Blanton

Joseph Blanton
Audiology and Speech Consultant
Hearing and Speech Section
Bureau of Maternal and Child Health

MICHIGAN
WATER-WINTER WONDERLAND

JB:eo

"Equal Health Opportunity for All"

PUBLIC SCHOOLS OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF PUPIL PERSONNEL SERVICES
ADMINISTRATION ANNEX NO. 3
1411 K STREET, NW.
WASHINGTON, D. C. 20005

DIVISION OF SPECIAL EDUCATION

November 20, 1967

Mrs. Augustine Gentile, Statistician
Kendall School of Gallaudet College
7th and Florida Avenue, N. E.
Washington, D. C. 20002

Dear Mrs. Gentile:

The need for pertinent statistical information for all handicapped children is nationally recognized.

I am most appreciative of this information on hearing impaired children.

Please keep me informed and share additional data with this office whenever possible.

Sincerely yours,

Stanley E. Jackson

Stanley E. Jackson
Director of Special Education

Arkansas Children's Hearing and Speech Center
4023 LEE AVENUE
PHONE MO 4-1380
LITTLE ROCK, ARKANSAS 72205

Oct. 27, 1967

SPONSOR:
ARKANSAS STATE BOARD OF HEALTH

Miss Augustine Gentile
Statistician
Gallaudet College
Kendall Green
Washington, D. C. 20002

Dear Miss Gentile:

Please excuse the delay in returning the enclosed information, but it was necessary to obtain it from several sources.

Credit for the compilation of information for Section II goes to Mrs. Daisye Zimmerman, who is in charge of the statewide Hearing and Vision screening program for the Maternal and Child Health Division of the State Board of Health.

Information about sections III, IV and V were obtained from Mr. Tom J. Hicks, head of the Special Services Division of the State Department of Education.

We consider it a privilege to help in this survey.

Sincerely,

Donald D. Gobin
Director

DDG:jt
Enclosure

STATE OF DELAWARE

DEPARTMENT OF PUBLIC INSTRUCTION
DOVER, DELAWARE 19901
302-734-5711

RICHARD P. GOUSHA
STATE SUPERINTENDENT
PUBLIC INSTRUCTION

ROGER C. MOWREY (ACTING)
PAUL M. HODGSON
HOWARD E. ROW
ASSISTANT SUPERINTENDENTS

May 22, 1967

Miss Augustire Gentile, Statistician
Office of Psychological Research
Gallaudet College
Kendall Green
Washington, D. C. 20002

Dear Miss Gentile:

Enclosed you will find the complete report from the State of Delaware on the "Status of Identification Audiometry and Educational and Health Services for the Hearing-Impaired" study being conducted at Gallaudet College under a grant from the U.S. Office of Education.

As you will observe, many of the appendix documents are out of date and are in the process of revision to update. It is hoped that much work can be done on revising our numerous forms this summer.

It has been our pleasure to cooperate in this study and would request that the results be shared with the Department when complete. Please advise if you wish additional information or clarification.

Sincerely yours,

John S. Charlton, Director
Division of Pupil Personnel Services

Richard B. French

Richard B. French,
Assistant Supervisor,
Speech & Hearing Services

RBF/de
Encl: Forms & Materials

STATE OF GEORGIA
DEPARTMENT OF EDUCATION
STATE OFFICE BUILDING
ATLANTA, 30334

JACK P. NIX
STATE SUPERINTENDENT OF SCHOOLS

May 8, 1967

Mr. Augustine Gentile
Research Professor
Gallaudet College
Kendall Green
Washington, D.C. 20002

Dear Mr. Gentile:

I am glad to know that Gallaudet College has begun a project to develop a nationwide system for reporting hearing impaired children. The information provided from the reports should be of immeasurable help in planning an educational program for these young people.

Georgia presently has a small public school program for the hearing impaired; however, we will be glad to try to get the information you request. Please address future communications to Dr. Mamie J. Jones, Director of our Division for Exceptional Children.

Sincerely,

Jack P. Nix
State Superintendent of Schools

JPN:pa

cc: Dr. H. Titus Singletary, Jr.
Dr. Mamie J. Jones

THE DIVISION OF HEALTH OF MISSOURI
OF THE DEPARTMENT OF PUBLIC HEALTH AND WELFARE
JEFFERSON CITY, MISSOURI 65101

L.M. GARNER, M.D., M.P.H.
ACTING DIRECTOR OF
THE DIVISION OF HEALTH

ADDRESS ALL COMMUNICATIONS
TO THE DIVISION OF HEALTH

January 15, 1968

Mr. Augustine Gentile, Research Professor
Demographic and Educational Statistics
Gallaudet College
Kendall Green, Washington, D.C. 20002

Dear Mr. Gentile:

Enclosed please find information available in response to your recent questionaire. I trust that this will be of help.

If further or more detailed information is necessary, do not hesitate to contact me and I will try to fulfill the request.

I would be interested in hearing of results of this survey.

Thank you for your cooperation.

Sincerely,

Enid D Jones

(Mrs.) Enid D. Jones, Director
Programs of Speech and Hearing
Consultant for Mentally Retarded

EDJ:olg

Enclosure

STATE OF MAINE
Department of Education
AUGUSTA, MAINE 04330

August 21, 1967

Mr. Augustine Gentile
Office of Psychological Research
Gallaudet College
7th and Florida Avenue, N.E.
Washington, D. C. 20002

Dear Mr. Gentile:

May I express further apologies for the lateness of this report. Our Bureau Chief is still on sick leave, leaving us short on staff that normally could perform studies and complete questionnaires such as yours,

First I want to advise you of our intent to include a request for a Speech and Hearing Supervisor in Maine's 1967-68 (academic year) State Plan under Title VI, Amendments to the Elementary and Secondary Education Act of 1965. We have needed this staff member for many years, and now it looks like federal funds, expected this fall, will be granted. As long as the grant program exists, the Speech and Hearing Supervisor will have a permanent position as far as we can tell at this stage.

This person will have, as one of his major functions, the responsibility of reviewing the entire state program of the testing, reporting, and serving hearing-handicapped school children in Maine. Consequently we expect that a comprehensive listing of these exceptional children will be accumulated in a central position, or site, here in Augusta. This will be done by joint efforts of our Supervisor, the office of Public Health Nursing, the Division of Crippled Children's Services and in cooperation with the Speech and Hearing Consultant in the Maine Department of Health and Welfare.

Presently our Maine School Laws are not written in such a manner as to involve our Department in activities at the local level regarding hearing testing. As you will see, the law specifies that testing will be done, but that the school committees are finally invested with the responsibilities of testing, recording and reporting.

Enclosed with this letter are the Health Record and the Notice to Parent or Guardian. Unfortunately our limited staff has found it impossible to even try to supervise (or police) the local efforts. There have been some gaps in the follow-up procedure, I am sure, after a child has been reported with a handicap. On the other hand, we are receiving many notices of defects, with requests for a special education program consisting of home instruction, supplementary tutoring, or an auditory trainer (desk-type amplifier). Thus our system is not completely ineffectual.

Copies of two statements from staff members in the Maine Department of Health and Welfare are enclosed for your consideration. This is privileged information and cautious use of the information will be much appreciated. I enclose them so that you will see the need of definite action before we can all be pulling together to form a good plan for the identification of these children.

My answer to your items in Attachment A will be sent to you next week.

Your study into the feasibility of a nationwide system for reporting hearing impaired children is an extremely worthwhile undertaking. Our State stands to gain a great deal from your findings.

Our area newspaper is publishing an article on this very topic next week. I will send you a copy of the item.

Sincerely yours,

Beverly V. Trenholm

(Mr.) Beverly V. Trenholm
Acting Bureau Chief
Guidance and Special
Education

BVT/mwd
Enc.

Saint Louis Hearing and Speech Center

3600 N. Grand Blvd. • Saint Louis, Mo. 63107

OLive 2-1022

the sound of happiness

April 16, 1968

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MISS NANCY CULBERTSON

Mr. Augustine Gentile
Gallaudet College
7th & Florida Ave. N.E.,
Washington, D.C. 20002

Dear Mr. Gentile:

I certainly enjoyed making your acquaintance during your recent visit to St. Louis. Your data collection project sounds very exciting. I would like to contribute data on our children enrolled in our pre-school program. Please send me a supply of current information forms. Twenty seems to be enough at present.

I would be happy to receive a copy of the data collected on various states' facilities when it is available this Summer.

Sincerely,

C. E. Torrence

C. E. Torrence,
Audiologist, Speech Pathologist

CET:em

UNITED FUND MEMBER

DEPARTMENT OF PUBLIC INSTRUCTION

STATE OF NORTH CAROLINA RALEIGH

July 24, 1967

Miss Augustine Gentile, Statistician
Office of Psychological Research
Gallaudet College
Kendall Green
Washington, D. C. 20002

Dear Miss Gentile:

Enclosed is the information you requested about the status of identification audiometry and educational and health services for the hearing impaired in North Carolina. The findings of this project will be helpful in determining needs and for planning programs for the hearing impaired. We are happy to participate in this project, and we look forward to receiving a report.

This information was prepared by another member of our staff. If you have any questions, please direct your correspondence to Mr. Addison Neal Smith, Consultant of Speech and Hearing, North Carolina Department of Public Instruction, Raleigh, North Carolina.

If I can be of further help, please let me know.

Sincerely,

Pearle Ramos

(Mrs.) Pearle R. Ramos
Supervisor, Speech and Hearing
Special Education

PRR:md

Enclosure

Washtenaw County

Intermediate School District

NICK A. IANNI, Superintendent

oard of Education
arl R. Anderson
lbert J. Coudron
larence W. Markham
race Stierle
lvira Vogel
etty Savage, Treas.

CLAUDE ELMORE
Adm. Assistant
FRED NOWLAND
Director of Special Education
DR. JACK KIRSH
Director of Instruction
DAVE CLASSON
Director of Data Processing
DAN BLOMQUIST
Director of I. M. C.

October 16, 1967

Augustine Gentile
Gallaudet College
Washington, D. C.

Dear Mr. Gentile:

This is in regard to your research and/or demonstration project, An Investigation of Procedures in the Development of a Model Reporting System on Hearing Impairment by School Systems, which was funded under Public Law 88-164.

We are very interested in receiving information regarding your project, and would appreciate follow-up information and results if you have them available. In the event that your study is not completed, please palce us on your mailing list for this information when it is available.

We will look forward to hearing from you and thank you for your consideration.

Sincerely,

John C Baker

John C. Baker, Coordinator
Programs for the Physically
Handicapped

JCB/ele

130 SOUTH FIRST STREET ▪ ANN ARBOR, MICHIGAN 48108 ▪ (313) 665-8866

Texas State Department of Health

JAMES E. PEAVY, M.D., M.P.H.
COMMISSIONER OF HEALTH

AUSTIN, TEXAS

J. B. COPELAND, M.D.
DEPUTY COMMISSIONER

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W. KENNETH THURMOND, D.D.S.

June 5, 1967

Mr. Augustine Gentile
Statistician
Gallaudet College
Kendall Green, Washington, D.C. 20002

Dear Mr. Gentile:

Enclosed is the information for Sections II and IV of Attachment A that you requested from this Department.

We are pleased to supply you with this information as there is a need for a nationwide system for reporting hearing impaired children.

If we can be of further service, please call on us.

Sincerely yours,

J. E. Peavy, M.D.
Commissioner of Health

STATE OF IOWA
Department of Public Instruction
217 - SEVENTH STREET
Des Moines, Iowa 50309

PAUL F. JOHNSTON
SUPERINTENDENT

W. T. EDGREN
ASSISTANT SUPERINTENDENT
ADMINISTRATION

DAVID H. BECHTEL
ADMINISTRATIVE ASSISTANT

L. N. JENSEN
ASSISTANT SUPERINTENDENT
INSTRUCTION

April 26, 1967

Professor Augustine Gentile
Office of Psychological Research
Gallaudet College
Kendall Green, Washington, D.C. 20002

Dear Professor Gentile,

Thank you for inviting the Iowa State Department of Public Instruction to participate in your project to develop a nationwide system for reporting hearing impaired children. Your letter of April 24 and attached materials indicate the study will be involved in the collection of audiologic, health, and educational data. This comprehensive approach is consistent with the philosophy of hearing conservation services now being developed by this state agency. You may be assured of our whole-hearted cooperation and involvement in any way in which you believe we can make a worthwhile contribution to the success of your project goals.

I have cancelled my appointments for next week and will, during that period, direct my attention to carefully completing the initial survey questionnaire with valid data and attaching additional information which may give you an idea of our program's philosophy, development to date, and orientation towards future development.

I consider the successful achievement of your projects' goals to be of such importance that you may be assured of having top priority assigned to any further requests for information or other types of involvement.

Sincerely yours,

Pupil Personnel Services Branch
Division of Special Education

Joseph Wolvek

Joseph Wolvek, Consultant
Hearing Conservation Services

JW/bms

HUNTER COLLEGE
OF THE CITY UNIVERSITY OF NEW YORK
695 Park Avenue
New York 21, N. Y.

Department of Education

February 14, 1968

Dr. Augustine Gentile
Gallaudet College
Washington, D.C.

Dear Dr. Gentile:

The Division of Teacher Education of the City University of New York has been awarded a grant to develop a special education instructional materials center as part of a greater state and national network of such centers. Part of our projected goal is the development of instructional materials and the modification of existing materials so that they best meet the needs of children with diverse and often complicated learning problems.

We would be interested in reports of your project
AN INVESTIGATION OF PROCEDURES ON THE DEVELOPMENT OF A MODEL REPORTING SYSTEM ON HEARING IMPAIRMENT BY SCHOOL SYSTEMS,
which we feel would assist us in our preliminary analysis of instructional materials for exceptional children and youth. May we also be placed on your mailing list for any additional materials that result from your work in this area.

Thank you for your courtesy in answering this request.

Very truly yours,

Gloria F. Wolinsky (fm)

Gloria F. Wolinsky
Director
Regional Special Education
Instructional Materials Center

GFW/nm

OE 6000 (REV. 9-66)

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF EDUCATION

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Final Report on the Development of System for Collecting Data on Hearing Impaired School Children.

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Methods for Collecting Data on Hearing Impaired Children.
Data on 4300 Hearing Impaired Students.
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Annual Census of Hearing Impaired Children.

ABSTRACT

In February 1966, the Division of Research, Bureau of Education for the Handicapped, Office of Education, in recognition of the need for factual information about the prevalence and characteristics of handicapped children, awarded a grant to Gallaudet College to develop a method for collecting and disseminating information on hearing handicapped children. This report describes activities related to the project and presents the results of these activities.

As part of the project, detailed information was collected on 4,300 of the estimated 6,755 hearing impaired students enrolled in schools, classes and other special education programs in the states of Maryland, Pennsylvania, Virginia, West Virginia, and the District of Columbia. The data collected on these students are presented in the report and includes information on hearing threshold levels, ability to communicate, intelligence levels, achievement levels, methods used to communicate and some selected demographic characteristics.

Also, as part of the project, every state in the country was surveyed to obtain descriptive information about hearing screening programs and educational services for the hearing impaired. The results of this survey are also presented in the report.

On the basis of the knowledge gained during the project, it is conlcuded that a nationwide system for collecting data on hearing impaired students is feasible. Recommendations containing detailed procedures for the establishment of such a system are given in the final sections of the report.